

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

REPUBLICAN PARTY OF VIRGINIA INC

ADDRESS (number and street)

115 EAST GRACE STREET

☐ Check if different than previously reported. (ACC)

RICHMOND

VA

23219-1741

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00001305

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☒ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
08 01 2012

through

M M M / D D D / Y Y Y Y Y Y  
08 31 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Robert S Fitzsimmonds III

Signature of Treasurer

Mr. Robert S Fitzsimmonds III

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
02 13 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

REPUBLICAN PARTY OF VIRGINIA INC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
08 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y  
08 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		41766.96
(b) Cash on Hand at Beginning of Reporting Period.....	367815.41	
(c) Total Receipts (from Line 19) .....	1217984.13	2624017.96
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1585799.54	2665784.92
7. Total Disbursements (from Line 31) .....	1109557.30	2189542.68
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	476242.24	476242.24
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	227827.96	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

REPUBLICAN PARTY OF VIRGINIA INC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	2

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	22295.00	292201.50
(ii) Unitemized .....	13887.00	172854.38
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	36182.00	465055.88
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	186130.00	223830.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ..... ►	222312.00	688885.88
12. Transfers From Affiliated/Other Party Committees.....	962000.00	1711189.01
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	332.62	8430.37
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	520.60	14487.10
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	32818.91	201025.60
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	32818.91	201025.60
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ..... ►	1217984.13	2624017.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ..... ►	1185165.22	2422992.36

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	27276.62	153930.26
(ii) Non-Federal Share.....	48491.78	236467.77
(b) Other Federal Operating Expenditures .....	16126.11	71709.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	91894.51	462107.07
22. Transfers to Affiliated/Other Party Committees.....	1500.00	11683.50
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	158.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	158.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	1016162.79	1715594.11
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	1016162.79	1715594.11
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1109557.30	2189542.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1061065.52	1953074.91

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	222312.00	688885.88
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	158.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	222312.00	688727.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	43402.73	225639.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	332.62	8430.37
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	43070.11	217208.93

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'ZG7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

Response to FEC Letter of Jan. 29, 2013 requesting additional information for the September Monthly Report (08/01/2012 - 08/31/2012)

Item 1 - Funds received from the Republican National Committee and the National Republican Senatorial Committee include a letter stating that none of the funds transferred were earmarked for any particular program or purpose. The Schedule B Line 30(B) disbursements listed on this Letter represent volunteer activity that meets the definition of Exempt Party Activity as set forth in 11CFR100.87 and 100.147. Payments for these disbursements were made from permissible Federal funds, and did not include any designated candidate funds.

Item 2 - Could not find a disbursement to "Petty cash" for "Per diem expense" on the Report. The only disbursements for "Per diem expense" were made to Sean Storan on 8/23 for \$500, and on 8/28 for \$750. These totals represented \$50 per day stipend for meals and gas expense.

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Bob Acree**

Mailing Address 41635 Bostonian Pl.

City State Zip Code  
 Aldie VA 20105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US Air Force

Occupation

Engineer

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 30 / 2012

**Transaction ID : SA11AI.274852**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Ms. Kim Albers**

Mailing Address 6002 Fox Crest Cir.

City State Zip Code  
 Midlothian VA 23112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Financial Manager

Occupation

CCA Financial

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 15 / 2012

**Transaction ID : SA11AI.274688**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**c. Mr. George H. Brauburger Jr.**

Mailing Address 3103 Waterton Dr.

City State Zip Code  
 Midlothian VA 23113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 06 / 2012

**Transaction ID : SA11AI.274547**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

**A. Mrs. Bliss S. Brown**

Mailing Address 2300 Cedarfield Pkwy. Apt. 230

City	State	Zip Code
Richmond	VA	23233

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2012

Transaction ID : SA11AI.274765

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Col. Adelbert W Carpenter**

Mailing Address 3720 Acosta Rd.

City	State	Zip Code
Fairfax	VA	22031

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

Transaction ID : SA11AI.274667

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Robert E Drain**

Mailing Address 9501 Lynnhall Pl.

City	State	Zip Code
Alexandria	VA	22309

FEC ID number of contributing federal political committee.

C

Name of Employer

Hudgins Law Firm

Occupation

Attorney

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2012

Transaction ID : SA11AI.274776

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Hollis D Ellis**

Mailing Address 917 Mains Creek Rd

City State Zip Code  
 Chesapeake VA 23320

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAE Inc

Occupation

Civil Engineer

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.00

Date of Receipt

08 / 06 / 2012

Transaction ID : SA11AI.274559

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. Samuel B Gunter**

Mailing Address 456 Burch Ln.

City State Zip Code  
 Boyce VA 22620-9801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

08 / 02 / 2012

Transaction ID : SA11AI.274527

Amount of Each Receipt this Period

145.00

Full Name (Last, First, Middle Initial)

**C. Edward H Hamm**

Mailing Address 243 S Beach Rd

City State Zip Code  
 Hobe Sound FL 33455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

08 / 17 / 2012

Transaction ID : SA11AI.274778

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

995.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Robert L Hartwell**

Mailing Address 485 Harbor Side Street  
Suite 803

City State Zip Code  
Woodbridge VA 22191

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hartwell Capitol

Occupation

President

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

08 / 20 / 2012

Transaction ID : SA11AI.274807

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Mr. Robert L Hartwell**

Mailing Address 485 Harbor Side Street  
Suite 803

City State Zip Code  
Woodbridge VA 22191

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hartwell Capitol

Occupation

President

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / 22 / 2012

Transaction ID : SA11AI.274824

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Mr. Charles P. Heeter Jr.**

Mailing Address 1435 Oakview Drive

City State Zip Code  
McLean VA 22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Deloitte LLP

Occupation

Principal

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 31 / 2012

Transaction ID : SA11AI.274859

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Robert Johnson**

Mailing Address 9305 Jenna Ct.

City State Zip Code  
 Springfield VA 22153

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BAE Systems

Occupation

Defense Industry

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

08 / 02 / 2012

**Transaction ID : SA11AI.274528**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Ms. Karen W. Lang**

Mailing Address 6610 White Post Rd

City State Zip Code  
 Centreville VA 20121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Requested

Occupation

Requested

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

08 / 16 / 2012

**Transaction ID : SA11AI.274724**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Ms. Julie C Lucas**

Mailing Address 3354 Nadia Loop

City State Zip Code  
 Woodbridge VA 22193

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Capital management

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 20 / 2012

**Transaction ID : SA11AI.274808**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. A. L. Mangum**

Mailing Address PO Box 16091

City State Zip Code  
 Lubbock TX 79490

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2012

**Transaction ID : SA11AI.274810**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael Benjamin Marchi**

Mailing Address 29259 Superior Circle

City State Zip Code  
 Easton MD 21601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2012

**Transaction ID : SA11AI.274676**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Mr. Evan Marks**

Mailing Address 1185 Park Ave.

City State Zip Code  
 New York NY 10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Alben Asset Management LLC

Occupation

Investor

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : SA11AI.274867**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Edwin B Meade Jr.**

Mailing Address 1500 Westbrook Ct. Apt. 3144

City State Zip Code  
 Richmond VA 23227-3373

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Davenport & Company, LLC

Occupation  
 Stockbroker

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 01 / 2012

Transaction ID : SA11AI.274508

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Donald G Nelson**

Mailing Address 45 Chardonnay Ct

City State Zip Code  
 Danville CA 94506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 None

Occupation  
 Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5020.00

Date of Receipt

08 / 22 / 2012

Transaction ID : SA11AI.274825

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Mr. Patrick D. Nutz**

Mailing Address 7290 Hunton St.

City State Zip Code  
 Warrenton VA 20187-2243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 None

Occupation  
 Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 06 / 2012

Transaction ID : SA11AI.274596

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2625.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Oliver A. Pollard Jr.**

Mailing Address 1587 Westover Ave.

City

Petersburg

State

VA

Zip Code

23805

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 01 / 2012

**Transaction ID : SA11AI.274513**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Dr. Gerald Ramsey**

Mailing Address 6300 Richmond Pl.

City

Norfolk

State

VA

Zip Code

23508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Instant Systems

Occupation

CEO

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 15 / 2012

**Transaction ID : SA11AI.274690**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Charles R Rash**

Mailing Address 3915 Rive Dr

City

Alexandria

State

VA

Zip Code

22309-3054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / 10 / 2012

**Transaction ID : SA11AI.274651**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Hunter J Smith**

Mailing Address 1160 Tennis Rd.

City State Zip Code  
 Charlottesville VA 22901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 01 / 2012

**Transaction ID : SA11AI.274517**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Ms. Carrie Stempler**

Mailing Address 12170 Clipper Drive

City State Zip Code  
 Lake Ridge VA 22192

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Clinical/ Organizational Psychologist

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 18 / 2012

**Transaction ID : SA11AI.274800**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Edward S Stolle**

Mailing Address 2236 Kendall St.

City State Zip Code  
 Virginia Beach VA 23451-1766

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 06 / 2012

**Transaction ID : SA11AI.274615**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mr. George W Swift**

Mailing Address 1009 Highland Cir

City Blacksburg State VA Zip Code 24060-5616

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 06 / 2012

Transaction ID : SA11AI.274619

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Mr. Wendall S. Walker**

Mailing Address 2421 Old Forest Rd

City Lynchburg State VA Zip Code 24501-2450

FEC ID number of contributing federal political committee.

C

Name of Employer

VA. Dept. Labor & Industry

Occupation

Marketing

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

08 / 06 / 2012

Transaction ID : SA11AI.274623

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Ms. Carol Gravely White**

Mailing Address 7408 Three Chopt Road

City Richmond State VA Zip Code 23226-3806

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 10 / 2012

Transaction ID : SA11AI.274657

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

800.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mrs. Susan W Wood**

Mailing Address 11201 Fox Meadow Dr

City

Richmond

State

VA

Zip Code

23233-2218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2012

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / 20 / 2012

Transaction ID : SA11AI.274817

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5000.00

22295.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

## **A. GEORGE ALLEN FOR US SENATE**

Mailing Address 2819 NORTH PARHAM ROAD  
SUITE 210

City State Zip Code  
RICHMOND VA 23294

FEC ID number of contributing  
federal political committee.

**C** C00492462

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

115815.00

Date of Receipt

**08** / **22** / **2012**

**Transaction ID : SA11C.274874**

Amount of Each Receipt this Period

80815.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. GEORGE ALLEN FOR US SENATE**

Mailing Address 2819 NORTH PARHAM ROAD  
SUITE 210

City State Zip Code  
RICHMOND VA 23294

FEC ID number of contributing  
federal political committee.

**C** C00492462

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

196630.00

Date of Receipt

**08** / **31** / **2012**

**Transaction ID : SA11C.274880**

Amount of Each Receipt this Period

80815.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. ROBERT HURT FOR CONGRESS**

Mailing Address PO Box 2

City State Zip Code  
Chatham VA 24531

FEC ID number of contributing  
federal political committee.

**C** C00468405

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

24500.00

Date of Receipt

**08** / **23** / **2012**

**Transaction ID : SA11C.274871**

Amount of Each Receipt this Period

24500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

186130.00

186130.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

## **A. NATIONAL REPUBLICAN SENATORIAL COMMITTEE**

Mailing Address 425 SECOND STREET NE

City State Zip Code  
 WASHINGTON DC 20002

FEC ID number of contributing  
federal political committee.

**C** C00027466

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

**08 / 13 / 2012**

**Transaction ID : SA12.274877**

Amount of Each Receipt this Period

2500.00

Fund transfer

Full Name (Last, First, Middle Initial)

## **B. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City State Zip Code  
 WASHINGTON DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1586527.80

Date of Receipt

**08 / 01 / 2012**

**Transaction ID : SA12.274875**

Amount of Each Receipt this Period

952000.00

Fund transfer

Full Name (Last, First, Middle Initial)

## **C. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City State Zip Code  
 WASHINGTON DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1594027.80

Date of Receipt

**08 / 24 / 2012**

**Transaction ID : SA12.274876**

Amount of Each Receipt this Period

7500.00

Fund transfer

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

962000.00

962000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

## **A. Staples Ric**

Mailing Address 8988 W Broad Street

City  
Richmond

State  
VA

Zip Code  
23229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 23 / 2012

Transaction ID : SA15.274898

Amount of Each Receipt this Period

332.62

refund for return

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

332.62

332.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

## **A. Commonwealth of Virginia**

Mailing Address Department of Taxation  
3600 W. Broad St

City State Zip Code  
Richmond VA 23230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14487.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 06 / 2012

**Transaction ID : SA17.274870**

Amount of Each Receipt this Period

520.60

Tax check-off contribution

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

520.60

520.60

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Printing Express**

Mailing Address P. O. Box 1975

City

Harrisonburg

State

VA

Zip Code

22801

Purpose of Disbursement

Direct mail fundraising for Party

003

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2012

**Transaction ID : SB21B.274459**

Amount of Each Disbursement this Period

13626.11
----------

Full Name (Last, First, Middle Initial)

**B. Unisource Direct LLC**

Mailing Address 7 North Pinckney St

City

Madison

State

WI

Zip Code

53703

Purpose of Disbursement

Direct mail fundraising for Party

003

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2012

**Transaction ID : SB21B.274451**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

16126.11
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16126.11
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Fairfax County Republican Committee**

Mailing Address 4246 Chain Bridge Rd

City	State	Zip Code
Fairfax	VA	22030

Purpose of Disbursement  
Fund transfer

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB22.274365**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Harrisonburg City Republican Committee**

Mailing Address 1062 Wyndham Dr

City	State	Zip Code
Harrisonburg	VA	22801

Purpose of Disbursement  
Fund transfer

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB22.274366**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00
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1500.00
---------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Airtel Group Inc**

Mailing Address P. O. Box 11181

City	State	Zip Code
Chattanooga	TN	37401

Purpose of Disbursement  
Voip phone minutes

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2012

**Transaction ID : SB30B.274084**

Amount of Each Disbursement this Period

26290.27
----------

Full Name (Last, First, Middle Initial)

**B. Airtel Group Inc**

Mailing Address P. O. Box 11181

City	State	Zip Code
Chattanooga	TN	37401

Purpose of Disbursement  
Voip phone minutes

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	09	/	2012

**Transaction ID : SB30B.274088**

Amount of Each Disbursement this Period

2987.69
---------

Full Name (Last, First, Middle Initial)

**C. Airtel Group Inc**

Mailing Address P. O. Box 11181

City	State	Zip Code
Chattanooga	TN	37401

Purpose of Disbursement  
Voip phone minutes

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : SB30B.274066**

Amount of Each Disbursement this Period

73.95
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

29351.91
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Airtel Group Inc**

Mailing Address P. O. Box 11181

City	State	Zip Code
Chattanooga	TN	37401

Purpose of Disbursement  
Voip phone minutes

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2012

**Transaction ID : SB30B.274301**

Amount of Each Disbursement this Period

4616.01
---------

Full Name (Last, First, Middle Initial)

**B. Anthem Dental Alternative**

Mailing Address P. O. Box 25005

City	State	Zip Code
Richmond	VA	23260

Purpose of Disbursement  
Employee dental ins premium

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2012

**Transaction ID : SB30B.274071**

Amount of Each Disbursement this Period

255.56
--------

Full Name (Last, First, Middle Initial)

**C. Anthem Healthkeepers**

Mailing Address P. O. Box 85085

City	State	Zip Code
Richmond	VA	23285

Purpose of Disbursement  
Employee health ins premium

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2012

**Transaction ID : SB30B.274072**

Amount of Each Disbursement this Period

3928.61
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►

8800.18

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Awakening Ministries**

Mailing Address 119 Balch Springs Cir SE

City	State	Zip Code
Leesburg	VA	20175

Purpose of Disbursement  
Booth rental

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2012

**Transaction ID : SB30B.274078**

Amount of Each Disbursement this Period

350.00
--------

Full Name (Last, First, Middle Initial)

**B. Sophia Barber**

Mailing Address 5215 Harvest Ln

City	State	Zip Code
Barboursville	VA	22923

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274007**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Sophia Barber**

Mailing Address 5215 Harvest Ln

City	State	Zip Code
Barboursville	VA	22923

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274213**

Amount of Each Disbursement this Period

1250.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2100.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. James M Bebout**

Mailing Address 28520 Bluestone Ct

City	State	Zip Code
Damascus	VA	24236

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : SB30B.274009**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. James M Bebout**

Mailing Address 28520 Bluestone Ct

City	State	Zip Code
Damascus	VA	24236

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2012

**Transaction ID : SB30B.274214**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Nicholas Bertero**

Mailing Address 2265 Willow Oak Cir

City	State	Zip Code
Virginia Beach	VA	23451

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : SB30B.274011**

Amount of Each Disbursement this Period

1250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3750.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Nicholas Bertero**

Mailing Address 2265 Willow Oak Cir

City	State	Zip Code
Virginia Beach	VA	23451

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274167**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Nicholas Bertero**

Mailing Address 2265 Willow Oak Cir

City	State	Zip Code
Virginia Beach	VA	23451

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274215**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Kevin R Besserer**

Mailing Address 46148 Aisquith Ter

City	State	Zip Code
Sterling	VA	20165

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274012**

Amount of Each Disbursement this Period

1250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3750.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Kevin R Besserer**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

Mailing Address 46148 Aisquith Ter

City	State	Zip Code
Sterling	VA	20165

**Transaction ID : SB30B.274216**Purpose of Disbursement  
Salary expense

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1250.00
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Kevin R Besserer**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2012

Mailing Address 46148 Aisquith Ter

City	State	Zip Code
Sterling	VA	20165

**Transaction ID : SB30B.274425**Purpose of Disbursement  
Employee mileage & food reimburse-no item > \$200

002

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

657.67
--------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Cathy S Bolden**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2012

Mailing Address 8324 Wetherden Dr

City	State	Zip Code
Mechanicsville	VA	23113

**Transaction ID : SB30B.274069**Purpose of Disbursement  
Salary

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1509.02
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3416.69
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Cathy S Bolden**

Mailing Address 8324 Wetherden Dr

City	State	Zip Code
Mechanicsville	VA	23113

Purpose of Disbursement  
Salary advance

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2012

**Transaction ID : SB30B.274270**

Amount of Each Disbursement this Period

700.00
--------

Full Name (Last, First, Middle Initial)

**B. Cathy S Bolden**

Mailing Address 8324 Wetherden Dr

City	State	Zip Code
Mechanicsville	VA	23113

Purpose of Disbursement  
Per diem expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2012

**Transaction ID : SB30B.274272**

Amount of Each Disbursement this Period

210.00
--------

Full Name (Last, First, Middle Initial)

**C. Cathy S Bolden**

Mailing Address 8324 Wetherden Dr

City	State	Zip Code
Mechanicsville	VA	23113

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274271**

Amount of Each Disbursement this Period

1509.02
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2419.02
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Bristol Motor Speedway**

Mailing Address 151 Speedway Blvd

City	State	Zip Code
Bristol	TN	37620

Purpose of Disbursement  
Rental booth

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274211**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Matt Brown**

Mailing Address 4304 Kalanchoe Dr

City	State	Zip Code
N. Chesterfield	VA	23237

Purpose of Disbursement  
Employee mileage reimbursement

002

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : SB30B.274327**

Amount of Each Disbursement this Period

156.59
--------

Full Name (Last, First, Middle Initial)

**C. Matt Brown**

Mailing Address 4304 Kalanchoe Dr

City	State	Zip Code
N. Chesterfield	VA	23237

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274013**

Amount of Each Disbursement this Period

1250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3906.59

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Matt Brown**

Mailing Address 4304 Kalanchoe Dr

City	State	Zip Code
N. Chesterfield	VA	23237

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274217**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Capital Region Airport Commission**

Mailing Address 1 Richard E Byrd Terminal Dr

City	State	Zip Code
Richmond	VA	23250

Purpose of Disbursement  
Hanger rental fee

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2012

**Transaction ID : SB30B.274426**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. Stacy Carey**

Mailing Address 47752 Rafter Ct

City	State	Zip Code
Sterling	VA	20165

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274014**

Amount of Each Disbursement this Period

1250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Stacy Carey**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

Mailing Address 47752 Rafter Ct

City	State	Zip Code
Sterling	VA	20165

**Transaction ID : SB30B.274218**Purpose of Disbursement  
Salary expense

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1250.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Krystle Cluen**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2012

Mailing Address 33 Prince Ct

City	State	Zip Code
Stuarts Draft	VA	24477

**Transaction ID : SB30B.274413**Purpose of Disbursement  
Salary expense

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

3500.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Cookies by Design**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2012

Mailing Address 3324 W. Cary St

City	State	Zip Code
Richmond	VA	23221

**Transaction ID : SB30B.274357**Purpose of Disbursement  
Employee mileage reimbursement

002

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

464.70

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

5214.70

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Paul H Cooksey Jr.**

Mailing Address 902 Emerald Dr

City	State	Zip Code
Alexandria	VA	22308

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : SB30B.274015**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Paul H Cooksey Jr.**

Mailing Address 902 Emerald Dr

City	State	Zip Code
Alexandria	VA	22308

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2012

**Transaction ID : SB30B.274219**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. John F Corker**

Mailing Address 6130 Garden Rd

City	State	Zip Code
Springfield	VA	22152

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : SB30B.274016**

Amount of Each Disbursement this Period

1250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3750.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. John F Corker**

Mailing Address 6130 Garden Rd

City	State	Zip Code
Springfield	VA	22152

Purpose of Disbursement  
Salary expense

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274220**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Miguel E Cosio**

Mailing Address 15075 Ardmore Loop

City	State	Zip Code
Woodbridge	VA	22193

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

002

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2012

**Transaction ID : SB30B.274309**

Amount of Each Disbursement this Period

179.55
--------

Full Name (Last, First, Middle Initial)

**C. Miguel E Cosio**

Mailing Address 15075 Ardmore Loop

City	State	Zip Code
Woodbridge	VA	22193

Purpose of Disbursement  
Salary

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274334**

Amount of Each Disbursement this Period

1318.12
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2747.67

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Miguel E Cosio**

Mailing Address 15075 Ardmore Loop

City	State	Zip Code
Woodbridge	VA	22193

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274274**

Amount of Each Disbursement this Period

1318.13
---------

Full Name (Last, First, Middle Initial)

**B. County of Henrico**

Mailing Address P. O. Box 90775

City	State	Zip Code
Henrico	VA	23273

Purpose of Disbursement  
Personnel and vehicle security costs

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		17		2012

**Transaction ID : SB30B.274354**

Amount of Each Disbursement this Period

1851.77
---------

Full Name (Last, First, Middle Initial)

**C. Garrison R Coward**

Mailing Address 4213 Hunter Green Ct

City	State	Zip Code
Richmond	VA	23294

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274017**

Amount of Each Disbursement this Period

1350.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4519.90
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Garrison R Coward**

Mailing Address 4213 Hunter Green Ct

City	State	Zip Code
Richmond	VA	23294

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274221**

Amount of Each Disbursement this Period

1350.00
---------

Full Name (Last, First, Middle Initial)

**B. Creative Direct, LLC**Mailing Address 25 E. Main Street  
Suite 200

City	State	Zip Code
Richmond	VA	23219

Purpose of Disbursement  
Exempt Party Act.-Allen for Senate mailer

Candidate Name

**GEORGE ALLEN FOR US SENATE**

Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
State: VA	District: 00

Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274349**

Amount of Each Disbursement this Period

80815.00
----------

Full Name (Last, First, Middle Initial)

**C. Creative Direct, LLC**Mailing Address 25 E. Main Street  
Suite 200

City	State	Zip Code
Richmond	VA	23219

Purpose of Disbursement  
Exempt Party Act.- Allen for Senate mailer

Candidate Name

**GEORGE ALLEN FOR US SENATE**

Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
State: VA	District: 00

Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2012

**Transaction ID : SB30B.274297**

Amount of Each Disbursement this Period

80815.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

162980.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Creative Direct, LLC**Mailing Address 25 E. Main Street  
Suite 200

City Richmond State VA Zip Code 23219

Purpose of Disbursement  
Exempt Party Act.-Hurt for Congress mailers

Candidate Name

**ROBERT HURT FOR CONGRESS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2012

**Transaction ID : SB30B.274376**

Amount of Each Disbursement this Period

20352.00
----------

Full Name (Last, First, Middle Initial)

**B. Izik A Crispin**

Mailing Address 2663 Veda Dr

City Bristol State VA Zip Code 24201

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274222**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. DC Concert Ministries**

Mailing Address 2 Professional Dr

City Gaithersburg State MD Zip Code 20879

Purpose of Disbursement  
Booth rental

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2012

**Transaction ID : SB30B.274073**

Amount of Each Disbursement this Period

300.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21902.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Christine deTriquet**

Mailing Address 3020 Princess Anne Cres.

City	State	Zip Code
Chesapeake	VA	23321

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274089**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Christine deTriquet**

Mailing Address 3020 Princess Anne Cres.

City	State	Zip Code
Chesapeake	VA	23321

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274018**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Christine deTriquet**

Mailing Address 3020 Princess Anne Cres.

City	State	Zip Code
Chesapeake	VA	23321

Purpose of Disbursement  
Volunteers food,misc supplies-no item > \$200

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274893**

Amount of Each Disbursement this Period

205.28
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3955.28
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Christine deTriquet**

Mailing Address 3020 Princess Anne Cres.

City	State	Zip Code
Chesapeake	VA	23321

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274224**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Chesley K Edmunds**

Mailing Address 3800 Somerbrook Ct

City	State	Zip Code
Henrico	VA	23233

Purpose of Disbursement  
Employee reimbursement-see memo items

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274408**

Amount of Each Disbursement this Period

385.97
--------

Full Name (Last, First, Middle Initial)

**C. Chesley K Edmunds**

Mailing Address 3800 Somerbrook Ct

City	State	Zip Code
Henrico	VA	23233

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274408.0**

Amount of Each Disbursement this Period

200.07
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1635.97
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Hilton Garden Inn-Glen Allen**

Mailing Address 4050 Cox Rd

City	State	Zip Code
Glen Allen	VA	23060

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274408.1**

Amount of Each Disbursement this Period

185.90
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Chesley K Edmunds**

Mailing Address 3800 Somerbrook Ct

City	State	Zip Code
Henrico	VA	23233

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274335**

Amount of Each Disbursement this Period

1239.18
---------

Full Name (Last, First, Middle Initial)

**C. Chesley K Edmunds**

Mailing Address 3800 Somerbrook Ct

City	State	Zip Code
Henrico	VA	23233

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2012

**Transaction ID : SB30B.274362**

Amount of Each Disbursement this Period

286.17
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1525.35
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Chesley K Edmunds**

Mailing Address 3800 Somerbrook Ct

City	State	Zip Code
Henrico	VA	23233

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274275**

Amount of Each Disbursement this Period

1239.19
---------

Full Name (Last, First, Middle Initial)

**B. Bennett T Ewing**

Mailing Address 2129 Buford Rd

City	State	Zip Code
Richmond	VA	23235

Purpose of Disbursement  
Employee reimbursement-see memo items

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2012

**Transaction ID : SB30B.274885**

Amount of Each Disbursement this Period

383.53
--------

Full Name (Last, First, Middle Initial)

**C. Bennett T Ewing**

Mailing Address 2129 Buford Rd

City	State	Zip Code
Richmond	VA	23235

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2012

**Transaction ID : SB30B.274885.0**

Amount of Each Disbursement this Period

137.88
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1622.72
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Bennett T Ewing**

Mailing Address 2129 Buford Rd

City	State	Zip Code
Richmond	VA	23235

Purpose of Disbursement  
Volunteer food, misc. supplies-No item > \$200

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2012

**Transaction ID : SB30B.274885.1**

Amount of Each Disbursement this Period

245.65
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Bennett T Ewing**

Mailing Address 2129 Buford Rd

City	State	Zip Code
Richmond	VA	23235

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274226**

Amount of Each Disbursement this Period

1535.00
---------

Full Name (Last, First, Middle Initial)

**C. Bennett T Ewing**

Mailing Address 2129 Buford Rd

City	State	Zip Code
Richmond	VA	23235

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2012

**Transaction ID : SB30B.274424**

Amount of Each Disbursement this Period

58.94
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1593.94
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Ms. Jennifer Ewing**

Mailing Address 104 Fairfax Drive

City	State	Zip Code
Stephens City	VA	22655

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : SB30B.274020**

Amount of Each Disbursement this Period

1900.00
---------

Full Name (Last, First, Middle Initial)

**B. Ms. Jennifer Ewing**

Mailing Address 104 Fairfax Drive

City	State	Zip Code
Stephens City	VA	22655

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	28	/	2012

**Transaction ID : SB30B.274225**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Mrs. Susan Falconer**

Mailing Address 9121 Scott St.

City	State	Zip Code
Springfield	VA	22153

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : SB30B.274021**

Amount of Each Disbursement this Period

1500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4650.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mrs. Susan Falconer**

Mailing Address 9121 Scott St.

City	State	Zip Code
Springfield	VA	22153

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

001

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274228**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. Chris Farmer**

Mailing Address 4605 Demby Dr

City	State	Zip Code
Fairfax	VA	22032

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

001

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2012

**Transaction ID : SB30B.274415**

Amount of Each Disbursement this Period

3750.00
---------

Full Name (Last, First, Middle Initial)

**C. Michael F Flanagan**

Mailing Address 5100 Nahant Dr

City	State	Zip Code
Bethesda	MD	20816

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

002

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274315**

Amount of Each Disbursement this Period

264.51
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5514.51

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Michael F Flanagan**

Mailing Address 5100 Nahant Dr

City	State	Zip Code
Bethesda	MD	20816

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274316**

Amount of Each Disbursement this Period

173.85
--------

Full Name (Last, First, Middle Initial)

**B. Michael F Flanagan**

Mailing Address 5100 Nahant Dr

City	State	Zip Code
Bethesda	MD	20816

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274407**

Amount of Each Disbursement this Period

125.65
--------

Full Name (Last, First, Middle Initial)

**C. Michael F Flanagan**

Mailing Address 5100 Nahant Dr

City	State	Zip Code
Bethesda	MD	20816

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274022**

Amount of Each Disbursement this Period

1250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1549.50
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Michael F Flanagan**

Mailing Address 5100 Nahant Dr

City	State	Zip Code
Bethesda	MD	20816

Purpose of Disbursement  
Employee reimbursement-see memo items

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2012

**Transaction ID : SB30B.274386**

Amount of Each Disbursement this Period

331.63
--------

Full Name (Last, First, Middle Initial)

**B. Michael F Flanagan**

Mailing Address 5100 Nahant Dr

City	State	Zip Code
Bethesda	MD	20816

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2012

**Transaction ID : SB30B.274386.0**

Amount of Each Disbursement this Period

131.32
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Papa John's Fairfax**

Mailing Address 4246 Chain Bridge Road

City	State	Zip Code
Fairfax	VA	

Purpose of Disbursement  
Meal expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2012

**Transaction ID : SB30B.274386.1**

Amount of Each Disbursement this Period

200.31
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

331.63
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Michael F Flanagan**

Mailing Address 5100 Nahant Dr

City	State	Zip Code
Bethesda	MD	20816

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274229**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. FLS Connect, LLC**Mailing Address 7300 Hudson Blvd  
Suite 270

City	State	Zip Code
Saint Paul	MN	55128

Purpose of Disbursement  
Campaign walkbooks

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274436**

Amount of Each Disbursement this Period

1475.48
---------

Full Name (Last, First, Middle Initial)

**C. FLS Connect, LLC**Mailing Address 7300 Hudson Blvd  
Suite 270

City	State	Zip Code
Saint Paul	MN	55128

Purpose of Disbursement  
Campaign walkbooks

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274437**

Amount of Each Disbursement this Period

1145.16
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3870.64
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. FLS Connect, LLC**Mailing Address 7300 Hudson Blvd  
Suite 270

City Saint Paul State MN Zip Code 55128

Purpose of Disbursement  
Campaign walkbooks

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	27	/	2012

**Transaction ID : SB30B.274302**

Amount of Each Disbursement this Period

1370.52
---------

Full Name (Last, First, Middle Initial)

**B. FLS Connect, LLC**Mailing Address 7300 Hudson Blvd  
Suite 270

City Saint Paul State MN Zip Code 55128

Purpose of Disbursement  
Campaign walkbooks

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	29	/	2012

**Transaction ID : SB30B.274422**

Amount of Each Disbursement this Period

4139.24
---------

Full Name (Last, First, Middle Initial)

**C. Mr. Louis Fortier**

Mailing Address 716 Prince Charles Lane

City Virginia Beach State VA Zip Code 23452

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	29	/	2012

**Transaction ID : SB30B.274412**

Amount of Each Disbursement this Period

975.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6484.76

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Sarah Grassilli**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

Mailing Address 13179 Oak Farm Dr

City	State	Zip Code
Woodbridge	VA	22192

**Transaction ID : SB30B.274023**Purpose of Disbursement  
Salary expense

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1250.00
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Sarah Grassilli**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

Mailing Address 13179 Oak Farm Dr

City	State	Zip Code
Woodbridge	VA	22192

**Transaction ID : SB30B.274230**Purpose of Disbursement  
Salary expense

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1250.00
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Mr. Russell Hagood**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2012

Mailing Address 3704 London Circle

City	State	Zip Code
Roanoke	VA	24018

**Transaction ID : SB30B.274895**Purpose of Disbursement  
Volunteers food,misc supplies-no item > \$200

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

137.24
--------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2637.24

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Russell Hagood**

Mailing Address 3704 London Circle

City	State	Zip Code
Roanoke	VA	24018

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : SB30B.274024**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Mr. Russell Hagood**

Mailing Address 3704 London Circle

City	State	Zip Code
Roanoke	VA	24018

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	28	/	2012

**Transaction ID : SB30B.274231**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Mr. Russell Hagood**

Mailing Address 3704 London Circle

City	State	Zip Code
Roanoke	VA	24018

Purpose of Disbursement  
Reimburse mileage & food-no item > \$200

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	31	/	2012

**Transaction ID : SB30B.274430**

Amount of Each Disbursement this Period

452.58
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2952.58
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Eric Harris**

Mailing Address 625 Piney Forest Rd

City	State	Zip Code
Danville	VA	24540

Purpose of Disbursement  
Salary expense

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274168**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Eric Harris**

Mailing Address 625 Piney Forest Rd

City	State	Zip Code
Danville	VA	24540

Purpose of Disbursement  
Salary expense

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274232**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Patrick Hefflinger**

Mailing Address 10286 Bristow Center Dr

City	State	Zip Code
Bristow	VA	20136

Purpose of Disbursement  
Volunteers food,misc supplies-no item > \$200

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274896**

Amount of Each Disbursement this Period

225.84
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2725.84

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Patrick Hefflinger**

Mailing Address 10286 Bristow Center Dr

City Bristow	State VA	Zip Code 20136
-----------------	-------------	-------------------

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274025**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Patrick Hefflinger**

Mailing Address 10286 Bristow Center Dr

City Bristow	State VA	Zip Code 20136
-----------------	-------------	-------------------

Purpose of Disbursement  
Employee mileage reimbursement

002

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274328**

Amount of Each Disbursement this Period

128.06
--------

Full Name (Last, First, Middle Initial)

**C. Patrick Hefflinger**

Mailing Address 10286 Bristow Center Dr

City Bristow	State VA	Zip Code 20136
-----------------	-------------	-------------------

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274233**

Amount of Each Disbursement this Period

1500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2878.06
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Jeffrey Herr**

Mailing Address 63 River Ridge Ln

City	State	Zip Code
Fredericksburg	VA	22406

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274311**

Amount of Each Disbursement this Period

272.06
--------

Full Name (Last, First, Middle Initial)

**B. Jeffrey Herr**

Mailing Address 63 River Ridge Ln

City	State	Zip Code
Fredericksburg	VA	22406

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274312**

Amount of Each Disbursement this Period

316.72
--------

Full Name (Last, First, Middle Initial)

**C. Jeffrey Herr**

Mailing Address 63 River Ridge Ln

City	State	Zip Code
Fredericksburg	VA	22406

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : SB30B.274326**

Amount of Each Disbursement this Period

584.62
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1173.40
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Jeffrey Herr**

Mailing Address 63 River Ridge Ln

City	State	Zip Code
Fredericksburg	VA	22406

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274026**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Jeffrey Herr**

Mailing Address 63 River Ridge Ln

City	State	Zip Code
Fredericksburg	VA	22406

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274234**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. James E Hicks III**

Mailing Address 145 Fairview Rd

City	State	Zip Code
Newport News	VA	23606

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274336**

Amount of Each Disbursement this Period

1628.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4128.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. James E Hicks III**

Mailing Address 145 Fairview Rd

City	State	Zip Code
Newport News	VA	23606

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274276**

Amount of Each Disbursement this Period

1628.00
---------

Full Name (Last, First, Middle Initial)

**B. Holiday Inn Express-Richmond**

Mailing Address 201 E. Cary St

City	State	Zip Code
Richmond	VA	23219

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2012

**Transaction ID : SB30B.274444**

Amount of Each Disbursement this Period

110.69
--------

Full Name (Last, First, Middle Initial)

**C. Holiday Inn Roanoke**

Mailing Address 3315 Ordway Dr

City	State	Zip Code
Roanoke	VA	24017

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2012

**Transaction ID : SB30B.274171**

Amount of Each Disbursement this Period

365.20
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2103.89
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Holiday Inn Roanoke**

Mailing Address 3315 Ordway Dr

City	State	Zip Code
Roanoke	VA	24017

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2012

**Transaction ID : SB30B.274289**

Amount of Each Disbursement this Period

239.80
--------

Full Name (Last, First, Middle Initial)

**B. Holiday Inn Roanoke**

Mailing Address 3315 Ordway Dr

City	State	Zip Code
Roanoke	VA	24017

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2012

**Transaction ID : SB30B.274300**

Amount of Each Disbursement this Period

206.80
--------

Full Name (Last, First, Middle Initial)

**C. Eric B Hollander**

Mailing Address P. O. Box 1776

City	State	Zip Code
Folly Beach	SC	29439

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274337**

Amount of Each Disbursement this Period

1636.87
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2083.47
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Eric B Hollander**

Mailing Address P. O. Box 1776

City	State	Zip Code
Folly Beach	SC	29439

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2012

**Transaction ID : SB30B.274423**

Amount of Each Disbursement this Period

1291.24
---------

Full Name (Last, First, Middle Initial)

**B. Eric B Hollander**

Mailing Address P. O. Box 1776

City	State	Zip Code
Folly Beach	SC	29439

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274277**

Amount of Each Disbursement this Period

1636.88
---------

Full Name (Last, First, Middle Initial)

**C. Matt Hudgins**

Mailing Address 3610 Festival Park Plaza

City	State	Zip Code
Chester	VA	23831

Purpose of Disbursement  
Employee reimbursement-see memo items

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : SB30B.274900**

Amount of Each Disbursement this Period

499.47
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3427.59
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Matt Hudgins**

Mailing Address 3610 Festival Park Plaza

City	State	Zip Code
Chester	VA	23831

Purpose of Disbursement  
Volunteers food,misc supplies-no item > \$200

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : SB30B.274900.0**

Amount of Each Disbursement this Period

203.69
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Matt Hudgins**

Mailing Address 3610 Festival Park Plaza

City	State	Zip Code
Chester	VA	23831

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274027**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Matt Hudgins**

Mailing Address 3610 Festival Park Plaza

City	State	Zip Code
Chester	VA	23831

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274235**

Amount of Each Disbursement this Period

1250.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. David Hursey**

Mailing Address 3018 S. Glebe Rd

City	State	Zip Code
Arlington	VA	22206

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274028**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. David Hursey**

Mailing Address 3018 S. Glebe Rd

City	State	Zip Code
Arlington	VA	22206

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274236**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Angela J Inglett**

Mailing Address P. O. Box 538

City	State	Zip Code
Spout Spring	VA	24593

Purpose of Disbursement  
Reimburse misc. supplies-no item > \$200

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274402**

Amount of Each Disbursement this Period

263.21
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2763.21
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Angela J Inglett**

Mailing Address P. O. Box 538

City	State	Zip Code
Spout Spring	VA	24593

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : SB30B.274029**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Angela J Inglett**

Mailing Address P. O. Box 538

City	State	Zip Code
Spout Spring	VA	24593

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2012

**Transaction ID : SB30B.274237**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Landon James**

Mailing Address 2500 Linville Ct

City	State	Zip Code
Midlothian	VA	23113

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2012

**Transaction ID : SB30B.274307**

Amount of Each Disbursement this Period

21.15
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2521.15
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Landon James**

Mailing Address 2500 Linville Ct

City	State	Zip Code
Midlothian	VA	23113

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2012

**Transaction ID : SB30B.274325**

Amount of Each Disbursement this Period

78.78
-------

Full Name (Last, First, Middle Initial)

**B. Landon James**

Mailing Address 2500 Linville Ct

City	State	Zip Code
Midlothian	VA	23113

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274030**

Amount of Each Disbursement this Period

1375.00
---------

Full Name (Last, First, Middle Initial)

**C. Landon James**

Mailing Address 2500 Linville Ct

City	State	Zip Code
Midlothian	VA	23113

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274164**

Amount of Each Disbursement this Period

56.40
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1510.18
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Tim Johnson**

Mailing Address 8 Pin Oak Rd.

City	State	Zip Code
Newport News	VA	23601

Purpose of Disbursement  
Volunteers food,misc supplies-no item > \$200

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	27	/	2012

**Transaction ID : SB30B.274897**

Amount of Each Disbursement this Period

248.75
--------

Full Name (Last, First, Middle Initial)

**B. Mr. Tim Johnson**

Mailing Address 8 Pin Oak Rd.

City	State	Zip Code
Newport News	VA	23601

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	28	/	2012

**Transaction ID : SB30B.274238**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Mr. Tim Johnson**

Mailing Address 8 Pin Oak Rd.

City	State	Zip Code
Newport News	VA	23601

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	28	/	2012

**Transaction ID : SB30B.274363**

Amount of Each Disbursement this Period

697.02
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2195.77
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Timothy Johnson**

Mailing Address 1824 Robindale Rd

City	State	Zip Code
Richmond	VA	23235

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274031**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Tyler Jones**

Mailing Address 455 Albemarle Sq

City	State	Zip Code
Charlottesville	VA	22901

Purpose of Disbursement  
volunteers food,misc supplies-no item > \$200

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2012

**Transaction ID : SB30B.274894**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Tyler Jones**

Mailing Address 455 Albemarle Sq

City	State	Zip Code
Charlottesville	VA	22901

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2012

**Transaction ID : SB30B.274306**

Amount of Each Disbursement this Period

125.20
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1625.20
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Tyler Jones**

Mailing Address 455 Albemarle Sq

City	State	Zip Code
Charlottesville	VA	22901

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : SB30B.274324**

Amount of Each Disbursement this Period

280.83
--------

Full Name (Last, First, Middle Initial)

**B. Tyler Jones**

Mailing Address 455 Albemarle Sq

City	State	Zip Code
Charlottesville	VA	22901

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274032**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Tyler Jones**

Mailing Address 455 Albemarle Sq

City	State	Zip Code
Charlottesville	VA	22901

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274239**

Amount of Each Disbursement this Period

1250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2780.83
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Tyler Jones**

Mailing Address 455 Albemarle Sq

City	State	Zip Code
Charlottesville	VA	22901

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274431**

Amount of Each Disbursement this Period

312.20
--------

Full Name (Last, First, Middle Initial)

**B. Adam Kidd**

Mailing Address 1110 Calhoun St

City	State	Zip Code
Radford	VA	24141

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274033**

Amount of Each Disbursement this Period

2750.00
---------

Full Name (Last, First, Middle Initial)

**C. Sery E Kim**

Mailing Address 3815 Elbert Ave

City	State	Zip Code
Alexandria	VA	22305

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274321**

Amount of Each Disbursement this Period

610.53
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3672.73
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Sery E Kim**

Mailing Address 3815 Elbert Ave

City	State	Zip Code
Alexandria	VA	22305

Purpose of Disbursement  
Salary

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274333**

Amount of Each Disbursement this Period

1325.22
---------

Full Name (Last, First, Middle Initial)

**B. Sery E Kim**

Mailing Address 3815 Elbert Ave

City	State	Zip Code
Alexandria	VA	22305

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

002

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2012

**Transaction ID : SB30B.274356**

Amount of Each Disbursement this Period

446.19
--------

Full Name (Last, First, Middle Initial)

**C. Sery E Kim**

Mailing Address 3815 Elbert Ave

City	State	Zip Code
Alexandria	VA	22305

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

002

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274165**

Amount of Each Disbursement this Period

365.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2136.41

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Sery E Kim**

Mailing Address 3815 Elbert Ave

City	State	Zip Code
Alexandria	VA	22305

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2012

**Transaction ID : SB30B.274291**

Amount of Each Disbursement this Period

126.90
--------

Full Name (Last, First, Middle Initial)

**B. Sery E Kim**

Mailing Address 3815 Elbert Ave

City	State	Zip Code
Alexandria	VA	22305

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2012

**Transaction ID : SB30B.274421**

Amount of Each Disbursement this Period

286.10
--------

Full Name (Last, First, Middle Initial)

**C. Sery E Kim**

Mailing Address 3815 Elbert Ave

City	State	Zip Code
Alexandria	VA	22305

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274278**

Amount of Each Disbursement this Period

1325.22
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►

1738.22
---------

**TOTAL** This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. LAZ Parking**

Mailing Address P. O. Box 759311

City	State	Zip Code
Baltimore	MD	21275

Purpose of Disbursement  
Parking expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2012

**Transaction ID : SB30B.274299**

Amount of Each Disbursement this Period

1315.00
---------

Full Name (Last, First, Middle Initial)

**B. Zachary LeMaster**

Mailing Address 118 Roberta Dr

City	State	Zip Code
Hampton	VA	23666

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274035**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Zachary LeMaster**

Mailing Address 118 Roberta Dr

City	State	Zip Code
Hampton	VA	23666

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274240**

Amount of Each Disbursement this Period

1250.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3815.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mr. Francis A. Loehr III**

Mailing Address 9305 Edington Dr

City	State	Zip Code
Richmond	VA	23237

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274338**

Amount of Each Disbursement this Period

2421.82
---------

Full Name (Last, First, Middle Initial)

**B. Mr. Francis A. Loehr III**

Mailing Address 9305 Edington Dr

City	State	Zip Code
Richmond	VA	23237

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274279**

Amount of Each Disbursement this Period

2421.81
---------

Full Name (Last, First, Middle Initial)

**C. Henry Longley**

Mailing Address 3811 Fairfax Dr

City	State	Zip Code
Arlington	VA	22203

Purpose of Disbursement  
Mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274313**

Amount of Each Disbursement this Period

460.93
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5304.56
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. April M Lyman**

Mailing Address 8000 Le Havre Pl

City	State	Zip Code
Falls Church	VA	22042

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : SB30B.274036**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. April M Lyman**

Mailing Address 8000 Le Havre Pl

City	State	Zip Code
Falls Church	VA	22042

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2012

**Transaction ID : SB30B.274241**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Leah Malone**

Mailing Address 109 Bowie St

City	State	Zip Code
Staunton	VA	24401

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	10	/	2012

**Transaction ID : SB30B.274091**

Amount of Each Disbursement this Period

2369.50
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4869.50
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Jackson P Marsteller**

Mailing Address 193 W. Ocean View Ave

City  
NorfolkState  
VAZip Code  
23503Purpose of Disbursement  
Employee reimbursement-see memo items

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2012

**Transaction ID : SB30B.274398**

Amount of Each Disbursement this Period

889.43
--------

Full Name (Last, First, Middle Initial)

**B. Jackson P Marsteller**

Mailing Address 193 W. Ocean View Ave

City  
NorfolkState  
VAZip Code  
23503Purpose of Disbursement  
Employee mileage reimbursement

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2012

**Transaction ID : SB30B.274398.0**

Amount of Each Disbursement this Period

545.53
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Walmart Superstore**

Mailing Address 11400 West Broad Street

City  
Glen AllenState  
VAZip Code  
23060Purpose of Disbursement  
Snacks for volunteers

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2012

**Transaction ID : SB30B.274398.2**

Amount of Each Disbursement this Period

211.52
--------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

889.43
--------



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Jackson P Marsteller**

Mailing Address 193 W. Ocean View Ave

City	State	Zip Code
Norfolk	VA	23503

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274038**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Jackson P Marsteller**

Mailing Address 193 W. Ocean View Ave

City	State	Zip Code
Norfolk	VA	23503

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274242**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Cody May**

Mailing Address 2522-A Old Forest Rd

City	State	Zip Code
Lynchburg	VA	24501

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274317**

Amount of Each Disbursement this Period

97.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2597.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Cody May**

Mailing Address 2522-A Old Forest Rd

City	State	Zip Code
Lynchburg	VA	24501

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274319**

Amount of Each Disbursement this Period

186.84
--------

Full Name (Last, First, Middle Initial)

**B. Cody May**

Mailing Address 2522-A Old Forest Rd

City	State	Zip Code
Lynchburg	VA	24501

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274039**

Amount of Each Disbursement this Period

2925.00
---------

Full Name (Last, First, Middle Initial)

**C. Cody May**

Mailing Address 2522-A Old Forest Rd

City	State	Zip Code
Lynchburg	VA	24501

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274358**

Amount of Each Disbursement this Period

220.18
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3332.02
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Cody May**

Mailing Address 2522-A Old Forest Rd

City  
LynchburgState  
VAZip Code  
24501Purpose of Disbursement  
Employee mileage reimbursement

002

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2012

**Transaction ID : SB30B.274170**

Amount of Each Disbursement this Period

188.00
--------

Full Name (Last, First, Middle Initial)

**B. Cody May**

Mailing Address 2522-A Old Forest Rd

City  
LynchburgState  
VAZip Code  
24501Purpose of Disbursement  
Employee mileage reimbursement

002

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2012

**Transaction ID : SB30B.274303**

Amount of Each Disbursement this Period

109.98
--------

Full Name (Last, First, Middle Initial)

**C. Cody May**

Mailing Address 2522-A Old Forest Rd

City  
LynchburgState  
VAZip Code  
24501Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274243**

Amount of Each Disbursement this Period

1750.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2047.98

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Tamara A Minnick**

Mailing Address 370 Point Dr

City	State	Zip Code
Bumpass	VA	23024

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2012

**Transaction ID : SB30B.274085**

Amount of Each Disbursement this Period

601.06
--------

Full Name (Last, First, Middle Initial)

**B. Tamara A Minnick**

Mailing Address 370 Point Dr

City	State	Zip Code
Bumpass	VA	23024

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274339**

Amount of Each Disbursement this Period

490.69
--------

Full Name (Last, First, Middle Initial)

**C. Tamara A Minnick**

Mailing Address 370 Point Dr

City	State	Zip Code
Bumpass	VA	23024

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274280**

Amount of Each Disbursement this Period

490.69
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1582.44
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. D. Patrick Mullins**

Mailing Address 53 Point Dr

City	State	Zip Code
Bumpass	VA	23024

Purpose of Disbursement  
Chairman mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2012

**Transaction ID : SB30B.274310**

Amount of Each Disbursement this Period

510.60
--------

Full Name (Last, First, Middle Initial)

**B. D. Patrick Mullins**

Mailing Address 53 Point Dr

City	State	Zip Code
Bumpass	VA	23024

Purpose of Disbursement  
Chairman reimbursement-see memo items

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2012

**Transaction ID : SB30B.274446**

Amount of Each Disbursement this Period

1147.36
---------

Full Name (Last, First, Middle Initial)

**C. The Capes Resort Hotel**

Mailing Address 2001 Atlantic Ave

City	State	Zip Code
Virginia Beach	VA	23451

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2012

**Transaction ID : SB30B.274446.0**

Amount of Each Disbursement this Period

885.40
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1657.96
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Giovannis Restaurant**

Mailing Address 2006 Atlantic Ave

City	State	Zip Code
Virginia Beach	VA	23452

Purpose of Disbursement  
Meal expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2012

**Transaction ID : SB30B.274446.1**

Amount of Each Disbursement this Period

261.96
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. D. Patrick Mullins**

Mailing Address 53 Point Dr

City	State	Zip Code
Bumpass	VA	23024

Purpose of Disbursement  
Chairman mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2012

**Transaction ID : SB30B.274445**

Amount of Each Disbursement this Period

1155.73
---------

Full Name (Last, First, Middle Initial)

**C. Colin Newman**

Mailing Address 1009 Priory Pl

City	State	Zip Code
McLean	VA	22101

Purpose of Disbursement  
Reimburse food,misc supplies-no item > \$200

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2012

**Transaction ID : SB30B.275024**

Amount of Each Disbursement this Period

227.17
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1382.90
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Colin Newman**

Mailing Address 1009 Priory Pl

City	State	Zip Code
McLean	VA	22101

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274040**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Colin Newman**

Mailing Address 1009 Priory Pl

City	State	Zip Code
McLean	VA	22101

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274244**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. nTelos**

Mailing Address P O Box 630062

City	State	Zip Code
Dallas	TX	75263-0062

Purpose of Disbursement  
Cell phone minutes

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2012

**Transaction ID : SB30B.274298**

Amount of Each Disbursement this Period

2035.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4535.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. nTelos**

Mailing Address P O Box 630062

City	State	Zip Code
Dallas	TX	75263-0062

Purpose of Disbursement  
Cell phone minutes

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2012

**Transaction ID : SB30B.274443**

Amount of Each Disbursement this Period

104.00
--------

Full Name (Last, First, Middle Initial)

**B. Terrence M O'Connor**

Mailing Address 6216 Arkendale Rd

City	State	Zip Code
Alexandria	VA	22307

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274041**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Terrence M O'Connor**

Mailing Address 6216 Arkendale Rd

City	State	Zip Code
Alexandria	VA	22307

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274245**

Amount of Each Disbursement this Period

1250.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2604.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Terrence M O'Connor**

Mailing Address 6216 Arkendale Rd

City  
AlexandriaState  
VAZip Code  
22307Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2012

**Transaction ID : SB30B.274419**

Amount of Each Disbursement this Period

513.27
--------

Full Name (Last, First, Middle Initial)

**B. Gina M Padrone**

Mailing Address 8700 PineTop Dr

City  
RichmondState  
VAZip Code  
23294Purpose of Disbursement  
Salary

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274340**

Amount of Each Disbursement this Period

1531.55
---------

Full Name (Last, First, Middle Initial)

**C. Gina M Padrone**

Mailing Address 8700 PineTop Dr

City  
RichmondState  
VAZip Code  
23294Purpose of Disbursement  
Salary

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274281**

Amount of Each Disbursement this Period

1531.57
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3576.39
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Pakistan Festival**

Mailing Address 9108 Autumn Oak Ct

City	State	Zip Code
Fairfax Station	VA	22039

Purpose of Disbursement  
Festival booth rental

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2012

**Transaction ID : SB30B.274482**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Cary Palmer**

Mailing Address 2216 Falcon Hill Pl

City	State	Zip Code
Lynchburg	VA	24503

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274042**

Amount of Each Disbursement this Period

3000.00
---------

Full Name (Last, First, Middle Initial)

**C. Ty A Palmer**

Mailing Address 3811 Fairfax Dr

City	State	Zip Code
Arlington	VA	22203

Purpose of Disbursement  
Salary

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274341**

Amount of Each Disbursement this Period

1440.06
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**SUBTOTAL** of Disbursements This Page (optional)..... ►

5440.06
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**TOTAL** This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 83 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Ty A Palmer**

Mailing Address 3811 Fairfax Dr

City	State	Zip Code
Arlington	VA	22203

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2012

**Transaction ID : SB30B.274293**

Amount of Each Disbursement this Period

210.18
--------

Full Name (Last, First, Middle Initial)

**B. Ty A Palmer**

Mailing Address 3811 Fairfax Dr

City	State	Zip Code
Arlington	VA	22203

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274282**

Amount of Each Disbursement this Period

1440.06
---------

Full Name (Last, First, Middle Initial)

**C. Papa John's - Arlington**

Mailing Address 2440 Wilson Blvd

City	State	Zip Code
Arlington	VA	22201

Purpose of Disbursement  
Food for volunteers

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2012

**Transaction ID : SB30B.274891**

Amount of Each Disbursement this Period

184.32
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1834.56
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Eric J Philipkosky**

Mailing Address 12802 Sir Scott Ter

City	State	Zip Code
Chester	VA	23831

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274043**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Eric J Philipkosky**

Mailing Address 12802 Sir Scott Ter

City	State	Zip Code
Chester	VA	23831

Purpose of Disbursement  
Employee mileage reimbursement

002

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274359**

Amount of Each Disbursement this Period

642.63
--------

Full Name (Last, First, Middle Initial)

**C. Eric J Philipkosky**

Mailing Address 12802 Sir Scott Ter

City	State	Zip Code
Chester	VA	23831

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274246**

Amount of Each Disbursement this Period

1250.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3142.63
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Gabriella M Prado**

Mailing Address 4615 N. Park Ave

City	State	Zip Code
Chevy Chase	MD	20815

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274342**

Amount of Each Disbursement this Period

1289.77
---------

Full Name (Last, First, Middle Initial)

**B. Gabriella M Prado**

Mailing Address 4615 N. Park Ave

City	State	Zip Code
Chevy Chase	MD	20815

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274283**

Amount of Each Disbursement this Period

1289.78
---------

Full Name (Last, First, Middle Initial)

**C. Printing Express**

Mailing Address P. O. Box 1975

City	State	Zip Code
Harrisonburg	VA	22801

Purpose of Disbursement  
Printing of absentee ballots

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2012

**Transaction ID : SB30B.274455**

Amount of Each Disbursement this Period

3377.77
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5957.32
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Printing Express**

Mailing Address P. O. Box 1975

City	State	Zip Code
Harrisonburg	VA	22801

Purpose of Disbursement  
Convention pins

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2012

**Transaction ID : SB30B.274457**

Amount of Each Disbursement this Period

143.86
--------

Full Name (Last, First, Middle Initial)

**B. Printing Express**

Mailing Address P. O. Box 1975

City	State	Zip Code
Harrisonburg	VA	22801

Purpose of Disbursement  
Campaign collateral-bumper stickers

006

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2012

**Transaction ID : SB30B.274460**

Amount of Each Disbursement this Period

9572.23
---------

Full Name (Last, First, Middle Initial)

**C. Mr. Stephen B Quick III**

Mailing Address 3204 Stapleford Chase

City	State	Zip Code
Virginia Beach	VA	23452-6168

Purpose of Disbursement  
Employee withholding & payroll taxes

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2012

**Transaction ID : SB30B.274330**

Amount of Each Disbursement this Period

9115.61
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

18831.70
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Quickbooks Payroll Service**

Mailing Address P. O. Box 6170

City	State	Zip Code
Fredericksburg	VA	22403

Purpose of Disbursement  
Employee withholding & payroll taxes

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2012

**Transaction ID : SB30B.274269**

Amount of Each Disbursement this Period

8984.37
---------

Full Name (Last, First, Middle Initial)

**B. Whitney Reed**

Mailing Address 2600 S. Veitch St

City	State	Zip Code
Arlington	VA	22206

Purpose of Disbursement  
Salary expense

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274044**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Whitney Reed**

Mailing Address 2600 S. Veitch St

City	State	Zip Code
Arlington	VA	22206

Purpose of Disbursement  
Employee mileage reimbursement

002

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2012

**Transaction ID : SB30B.274290**

Amount of Each Disbursement this Period

194.59
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10428.96
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Whitney Reed**

Mailing Address 2600 S. Veitch St

City	State	Zip Code
Arlington	VA	22206

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274247**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Whitney Reed**

Mailing Address 2600 S. Veitch St

City	State	Zip Code
Arlington	VA	22206

Purpose of Disbursement  
Employee mileage reimbursement

002

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2012

**Transaction ID : SB30B.274420**

Amount of Each Disbursement this Period

277.84
--------

Full Name (Last, First, Middle Initial)

**C. Mr. David A Rexrode**

Mailing Address 52 Tanterra Drive

City	State	Zip Code
Stafford	VA	22556

Purpose of Disbursement  
Employee reimbursement-see memo item

002

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2012

**Transaction ID : SB30B.274378**

Amount of Each Disbursement this Period

439.32
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1967.16
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Hertz Rent-A-Car**

Mailing Address 4505 W. Broad St

City	State	Zip Code
Richmond	VA	23230

Purpose of Disbursement  
Car rental expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2012

**Transaction ID : SB30B.274378.0**

Amount of Each Disbursement this Period

439.32
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Mr. David A Rexrode**

Mailing Address 52 Tanterra Drive

City	State	Zip Code
Stafford	VA	22556

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274343**

Amount of Each Disbursement this Period

3183.64
---------

Full Name (Last, First, Middle Initial)

**C. Mr. David A Rexrode**

Mailing Address 52 Tanterra Drive

City	State	Zip Code
Stafford	VA	22556

Purpose of Disbursement  
Employee Reimbursement-see memo item

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		17		2012

**Transaction ID : SB30B.274384**

Amount of Each Disbursement this Period

745.40
--------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3929.04
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 90 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Jet Blue Airlines**

Mailing Address Logan Intl Airport

City	State	Zip Code
Boston	MA	02228

Purpose of Disbursement  
Airfare expense

002

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		17		2012

**Transaction ID : SB30B.274384.0**

Amount of Each Disbursement this Period

745.40
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Mr. David A Rexrode**

Mailing Address 52 Tanterra Drive

City	State	Zip Code
Stafford	VA	22556

Purpose of Disbursement  
Salary

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274284**

Amount of Each Disbursement this Period

3183.64
---------

Full Name (Last, First, Middle Initial)

**C. Anthony I Riley**

Mailing Address 829 Pacific Ave

City	State	Zip Code
Portsmouth	VA	23707

Purpose of Disbursement  
Employee mileage reimbursement

002

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2012

**Transaction ID : SB30B.274888**

Amount of Each Disbursement this Period

220.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3403.64

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Anthony I Riley**

Mailing Address 829 Pacific Ave

City	State	Zip Code
Portsmouth	VA	23707

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274045**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Anthony I Riley**

Mailing Address 829 Pacific Ave

City	State	Zip Code
Portsmouth	VA	23707

Purpose of Disbursement  
Volunteers food & misc supplies-no item > \$200

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274889**

Amount of Each Disbursement this Period

214.02
--------

Full Name (Last, First, Middle Initial)

**C. Anthony I Riley**

Mailing Address 829 Pacific Ave

City	State	Zip Code
Portsmouth	VA	23707

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274248**

Amount of Each Disbursement this Period

1250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2714.02
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 92 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Dustin J Rinehart**

Mailing Address 300-B Galleon Dr

City	State	Zip Code
Virginia Beach	VA	23451

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274046**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Dustin J Rinehart**

Mailing Address 300-B Galleon Dr

City	State	Zip Code
Virginia Beach	VA	23451

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274250**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Charles B Rush**

Mailing Address 10601 Rhoads Dr

City	State	Zip Code
Fredericksburg	VA	22407

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274318**

Amount of Each Disbursement this Period

48.41
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2548.41
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 93 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Charles B Rush**

Mailing Address 10601 Rhoads Dr

City	State	Zip Code
Fredericksburg	VA	22407

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274047**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Charles B Rush**

Mailing Address 10601 Rhoads Dr

City	State	Zip Code
Fredericksburg	VA	22407

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2012

**Transaction ID : SB30B.274304**

Amount of Each Disbursement this Period

72.38
-------

Full Name (Last, First, Middle Initial)

**C. Charles B Rush**

Mailing Address 10601 Rhoads Dr

City	State	Zip Code
Fredericksburg	VA	22407

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274251**

Amount of Each Disbursement this Period

1250.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2572.38
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Ms. Alexandria Rusnak**

Mailing Address 516 Sunridge Drive #103

City	State	Zip Code
Blacksburg	VA	24060

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274320**

Amount of Each Disbursement this Period

1189.56
---------

Full Name (Last, First, Middle Initial)

**B. Ms. Alexandria Rusnak**

Mailing Address 516 Sunridge Drive #103

City	State	Zip Code
Blacksburg	VA	24060

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274048**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Ms. Alexandria Rusnak**

Mailing Address 516 Sunridge Drive #103

City	State	Zip Code
Blacksburg	VA	24060

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274252**

Amount of Each Disbursement this Period

1250.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3689.56
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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

REPUBLICAN PARTY OF VIRGINIA INC

Three digital displays are shown side-by-side. The first display shows '08' with two small squares above it. The second display shows '10' with two small squares above it. The third display shows '2012' with four small squares above it.

Category/  
Type

180.48

08 / 13 / 2012

Category/  
Type

355.58

Category/  
Type

1250.00

1786.06

FEC Schedule B (Form 3X) Rev. 02/2003

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 96 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Joseph Russo**

Mailing Address 1575 Devon Ln

City	State	Zip Code
Harrisonburg	VA	22801

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	28	/	2012

**Transaction ID : SB30B.274253**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Joseph Russo**

Mailing Address 1575 Devon Ln

City	State	Zip Code
Harrisonburg	VA	22801

Purpose of Disbursement  
Reimburse food,misc supplies-no item > \$200

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	30	/	2012

**Transaction ID : SB30B.275023**

Amount of Each Disbursement this Period

171.68
--------

Full Name (Last, First, Middle Initial)

**C. Andrew Schwartz**

Mailing Address 2824 Cedar Cove Ln

City	State	Zip Code
Chesapeake	VA	23323

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	10	/	2012

**Transaction ID : SB30B.274323**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2421.68



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Andrew Schwartz**

Mailing Address 2824 Cedar Cove Ln

City	State	Zip Code
Chesapeake	VA	23323

Purpose of Disbursement  
Employee reimbursement-see memo items

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274403**

Amount of Each Disbursement this Period

1182.91
---------

Full Name (Last, First, Middle Initial)

**B. Andrew Schwartz**

Mailing Address 2824 Cedar Cove Ln

City	State	Zip Code
Chesapeake	VA	23323

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274403.0**

Amount of Each Disbursement this Period

979.91
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. VFW Post 392**

Mailing Address 2408 Bowland Pkwy

City	State	Zip Code
Virginia Beach	VA	23454

Purpose of Disbursement  
Hall rental

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2012

**Transaction ID : SB30B.274403.1**

Amount of Each Disbursement this Period

203.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1182.91
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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

REPUBLICAN PARTY OF VIRGINIA INC

### A. Andrew Schwartz

001

1750.00

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

## B. Andrew Schwartz

001

Transaction ID : SB30B.274254

1750.00

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**C. Jack G Shipley**

Diagram showing three 16-bit registers:

- MMIO\_08**: Contains the value 08. The top 16 bits are labeled M M.
- DIO\_08**: Contains the value 08. The top 16 bits are labeled D D.
- YIO\_2012**: Contains the value 2012. The top 16 bits are labeled Y Y Y Y.

002

Transaction ID : SB30B.274308

42.13

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3542.13

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Jack G Shipley**

Mailing Address 7106 Kella Way

City	State	Zip Code
Mechanicsville	VA	23111

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2012

**Transaction ID : SB30B.274329**

Amount of Each Disbursement this Period

260.58
--------

Full Name (Last, First, Middle Initial)

**B. Jack G Shipley**

Mailing Address 7106 Kella Way

City	State	Zip Code
Mechanicsville	VA	23111

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274344**

Amount of Each Disbursement this Period

2651.15
---------

Full Name (Last, First, Middle Initial)

**C. Jack G Shipley**

Mailing Address 7106 Kella Way

City	State	Zip Code
Mechanicsville	VA	23111

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274163**

Amount of Each Disbursement this Period

29.74
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2941.47
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Jack G Shipley**

Mailing Address 7106 Kella Way

City	State	Zip Code
Mechanicsville	VA	23111

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2012

**Transaction ID : SB30B.274292**

Amount of Each Disbursement this Period

23.74
-------

Full Name (Last, First, Middle Initial)

**B. Jack G Shipley**

Mailing Address 7106 Kella Way

City	State	Zip Code
Mechanicsville	VA	23111

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274285**

Amount of Each Disbursement this Period

2651.14
---------

Full Name (Last, First, Middle Initial)

**C. Marlon-David Sias**

Mailing Address 115 E. Grace St

City	State	Zip Code
Richmond	VA	23219

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274051**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4674.88

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Marlon-David Sias**

Mailing Address 115 E. Grace St

City	State	Zip Code
Richmond	VA	23219

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2012

**Transaction ID : SB30B.274295**

Amount of Each Disbursement this Period

1606.37
---------

Full Name (Last, First, Middle Initial)

**B. Marlon-David Sias**

Mailing Address 115 E. Grace St

City	State	Zip Code
Richmond	VA	23219

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274255**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Marlon-David Sias**

Mailing Address 115 E. Grace St

City	State	Zip Code
Richmond	VA	23219

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2012

**Transaction ID : SB30B.274411**

Amount of Each Disbursement this Period

500.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4106.37
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 102 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Erin A Stanley**

Mailing Address P. O. Box 187

City	State	Zip Code
Claudville	VA	24076

Purpose of Disbursement  
Salary

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2012

**Transaction ID : SB30B.274345**

Amount of Each Disbursement this Period

1490.57
---------

Full Name (Last, First, Middle Initial)

**B. Erin A Stanley**

Mailing Address P. O. Box 187

City	State	Zip Code
Claudville	VA	24076

Purpose of Disbursement  
Employee food reimbursement

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274375**

Amount of Each Disbursement this Period

128.82
--------

Full Name (Last, First, Middle Initial)

**C. Erin A Stanley**

Mailing Address P. O. Box 187

City	State	Zip Code
Claudville	VA	24076

Purpose of Disbursement  
Salary

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274286**

Amount of Each Disbursement this Period

1490.55
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3109.94
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. John Stapleton**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

Mailing Address 12030 Chase Crossing Cir  
#403

City North Bethesda State MD Zip Code 20852

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type**Transaction ID : SB30B.274053**

Amount of Each Disbursement this Period

1900.00
---------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. John Stapleton**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

Mailing Address 12030 Chase Crossing Cir  
#403

City North Bethesda State MD Zip Code 20852

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type**Transaction ID : SB30B.274256**

Amount of Each Disbursement this Period

1900.00
---------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. State Board of Elections**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2012

Mailing Address 200 N. Ninth St  
Rm 101

City Richmond State VA Zip Code 23219

Purpose of Disbursement  
Voter lists

001

Candidate Name

Category/  
Type**Transaction ID : SB30B.274353**

Amount of Each Disbursement this Period

172.75
--------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3972.75
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Sean Storan**

Mailing Address 1818 9th St South

City	State	Zip Code
Arlington	VA	22204

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274054**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Sean Storan**

Mailing Address 1818 9th St South

City	State	Zip Code
Arlington	VA	22204

Purpose of Disbursement  
Employee reimbursement-see memo items

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274368**

Amount of Each Disbursement this Period

1132.51
---------

Full Name (Last, First, Middle Initial)

**C. Sean Storan**

Mailing Address 1818 9th St South

City	State	Zip Code
Arlington	VA	22204

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274368.0**

Amount of Each Disbursement this Period

529.29
--------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3132.51
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Holiday Inn Express-Richmond**

Mailing Address 201 E. Cary St

City	State	Zip Code
Richmond	VA	23219

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274368.1**

Amount of Each Disbursement this Period

140.80
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Courtyard by Marriott-Va Beach**

Mailing Address 5700 Greenwich Rd

City	State	Zip Code
Virginia Beach	VA	23462

Purpose of Disbursement  
Lodging expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274368.2**

Amount of Each Disbursement this Period

200.67
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. National Car Rental**

Mailing Address 23430 Autopilot Dr

City	State	Zip Code
Dulles	VA	20166

Purpose of Disbursement  
Car rental expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274368.3**

Amount of Each Disbursement this Period

261.75
--------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Sean Storan**

Mailing Address 1818 9th St South

City	State	Zip Code
Arlington	VA	22204

Purpose of Disbursement  
Per diem expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2012

**Transaction ID : SB30B.274294**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Sean Storan**

Mailing Address 1818 9th St South

City	State	Zip Code
Arlington	VA	22204

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274257**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Sean Storan**

Mailing Address 1818 9th St South

City	State	Zip Code
Arlington	VA	22204

Purpose of Disbursement  
Per diem expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274266**

Amount of Each Disbursement this Period

750.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►

3250.00
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**TOTAL** This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Strategic Allied Consulting LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2012

Mailing Address 4701 Cox Rd  
Suite 301City State Zip Code  
Glen Allen VA 23060Purpose of Disbursement  
New voter and absentee ballot registration

Candidate Name

001

Category/  
Type**Transaction ID : SB30B.274350**

Amount of Each Disbursement this Period

500000.00

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Matthew T Strauss**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2012

Mailing Address 3811 N. Fairfax Dr

City State Zip Code  
Arlington VA 22203Purpose of Disbursement  
Salary expense

Candidate Name

001

Category/  
Type**Transaction ID : SB30B.274077**

Amount of Each Disbursement this Period

1500.00

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Matthew T Strauss**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2012

Mailing Address 3811 N. Fairfax Dr

City State Zip Code  
Arlington VA 22203Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

002

Category/  
Type**Transaction ID : SB30B.274305**

Amount of Each Disbursement this Period

120.66

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

501620.66

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Matthew T Strauss**

Mailing Address 3811 N. Fairfax Dr

City	State	Zip Code
Arlington	VA	22203

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274055**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. Matthew T Strauss**

Mailing Address 3811 N. Fairfax Dr

City	State	Zip Code
Arlington	VA	22203

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2012

**Transaction ID : SB30B.274166**

Amount of Each Disbursement this Period

364.47
--------

Full Name (Last, First, Middle Initial)

**C. Matthew T Strauss**

Mailing Address 3811 N. Fairfax Dr

City	State	Zip Code
Arlington	VA	22203

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274258**

Amount of Each Disbursement this Period

1500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3364.47
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Matthew T Strauss**

Mailing Address 3811 N. Fairfax Dr

City	State	Zip Code
Arlington	VA	22203

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2012

**Transaction ID : SB30B.274429**

Amount of Each Disbursement this Period

345.39
--------

Full Name (Last, First, Middle Initial)

**B. Target - Falls church**

Mailing Address 6100 Arlington Blvd

City	State	Zip Code
Falls church	VA	22044

Purpose of Disbursement  
Volunteers food, misc supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2012

**Transaction ID : SB30B.274899**

Amount of Each Disbursement this Period

403.02
--------

Full Name (Last, First, Middle Initial)

**C. Town of Herndon**

Mailing Address P. O. Box 427

City	State	Zip Code
Herndon	VA	20172

Purpose of Disbursement  
Festival booth rental

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2012

**Transaction ID : SB30B.274480**

Amount of Each Disbursement this Period

500.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1248.41
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Mrs. Laurie K. Tryfiates**

Mailing Address 4214 Oakhill Rd.

City	State	Zip Code
Fredericksburg	VA	22408

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274259**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. Mrs. Laurie Tryflates**

Mailing Address 4214 Oakhill Rd.

City	State	Zip Code
Fredericksburg	VA	22408

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274057**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. USA Lanyards**

Mailing Address 21128 Commerce Point Dr

City	State	Zip Code
Walnut	CA	91789

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2012

**Transaction ID : SB30B.274890**

Amount of Each Disbursement this Period

443.83
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3443.83
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Aaron Van Andel**

Mailing Address 354 Forest Grove Rd

City	State	Zip Code
Middletown	VA	22645

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274260**

Amount of Each Disbursement this Period

968.00
--------

Full Name (Last, First, Middle Initial)

**B. Victory Consulting Group LLC**

Mailing Address 3015 South Ridge Dr

City	State	Zip Code
Midlothian	VA	23112

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274058**

Amount of Each Disbursement this Period

1750.00
---------

Full Name (Last, First, Middle Initial)

**C. Victory Consulting Group LLC**

Mailing Address 3015 South Ridge Dr

City	State	Zip Code
Midlothian	VA	23112

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274262**

Amount of Each Disbursement this Period

1750.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4468.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Boyd C Wagner IV**

Mailing Address 1096 Grange Rd

City	State	Zip Code
Leesport	PA	19533

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2012

**Transaction ID : SB30B.274059**

Amount of Each Disbursement this Period

650.00
--------

Full Name (Last, First, Middle Initial)

**B. Boyd C Wagner IV**

Mailing Address 1096 Grange Rd

City	State	Zip Code
Leesport	PA	19533

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2012

**Transaction ID : SB30B.274263**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. Thomas Wennerstrom**

Mailing Address 511 Woodrose Ln

City	State	Zip Code
Hixson	TN	37343

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	14	/	2012

**Transaction ID : SB30B.274331**

Amount of Each Disbursement this Period

900.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►

2800.00
---------

**TOTAL** This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Thomas Wennerstrom**

Mailing Address 511 Woodrose Ln

City	State	Zip Code
Hixson	TN	37343

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2012

**Transaction ID : SB30B.274332**

Amount of Each Disbursement this Period

968.09
--------

Full Name (Last, First, Middle Initial)

**B. Thomas Wennerstrom**

Mailing Address 511 Woodrose Ln

City	State	Zip Code
Hixson	TN	37343

Purpose of Disbursement  
Salary expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274267**

Amount of Each Disbursement this Period

900.00
--------

Full Name (Last, First, Middle Initial)

**C. Thomas Wennerstrom**

Mailing Address 511 Woodrose Ln

City	State	Zip Code
Hixson	TN	37343

Purpose of Disbursement  
Employee mileage reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274268**

Amount of Each Disbursement this Period

512.60
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2380.69
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 114 OF 165

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

Full Name (Last, First, Middle Initial)

**A. Travis E Witt**

Mailing Address 1636 Tucker Ter

City	State	Zip Code
Evington	VA	24450

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274061**

Amount of Each Disbursement this Period

2575.00
---------

Full Name (Last, First, Middle Initial)

**B. Travis E Witt**

Mailing Address 1636 Tucker Ter

City	State	Zip Code
Evington	VA	24450

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2012

**Transaction ID : SB30B.274264**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. Alex Wright**

Mailing Address 1003 White Pine Dr

City	State	Zip Code
Bland	VA	24315

Purpose of Disbursement  
Salary expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2012

**Transaction ID : SB30B.274063**

Amount of Each Disbursement this Period

3065.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►

7140.00
---------

**TOTAL** This Period (last page this line number only)..... ►

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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

REPUBLICAN PARTY OF VIRGINIA INC

### A. Andrew Yates

001

2500.00

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

### B. Michael Young

MM / DD / YYYY

Mailing Address 2712 Holly Ridge Ln

City	State	Zip Code
Williamsburg	VA	23185

Purpose of Disbursement
Salary expense

001

Transaction ID : SB30B.274065

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

### C. Michael Young

Date of Disbursement

Mailing Address 2712 Holly Ridge Ln

City	State	Zip Code
Williamsburg	VA	23185

Purpose of Disbursement
Salary expense

001

Transaction ID : SB30B.274265

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

5500.00

**TOTAL** This Period (last page this line number only).....

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

REPUBLICAN PARTY OF VIRGINIA INC

00.

Category/  
Type

940.48

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

Category/  
Type

Amount of Each Disbursement this Period

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

940.48

1015577.59

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 117 OF 165

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FLS Connect, LLC

Nature of Debt (Purpose):

Telemarketing fundraising for Party

Mailing Address 7300 Hudson Blvd  
Suite 270City State Zip Code  
Saint Paul MN 55128

Outstanding Balance Beginning This Period

76569.32

Transaction ID : SD10.211263

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

76569.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Platinum Plus for Business

Nature of Debt (Purpose):

Credit card charges

Mailing Address P. O. Box 15469

City State Zip Code  
Wilmington DE 19886

Outstanding Balance Beginning This Period

7827.18

Transaction ID : SD10.229283

Amount Incurred This Period

91.73

Payment This Period

400.00

Outstanding Balance at Close of This Period

7518.91

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Printing Express

Nature of Debt (Purpose):

Invitations for Victory dinner

Mailing Address P. O. Box 1975

City State Zip Code  
Harrisonburg VA 22801

Outstanding Balance Beginning This Period

112834.78

Transaction ID : SD10.229282

Amount Incurred This Period

7090.30

Payment This Period

26719.97

Outstanding Balance at Close of This Period

93205.11

1) SUBTOTALS This Period This Page (optional)..... ►

177293.34

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 118 OF 165

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Purchase Power**

Nature of Debt (Purpose):

Meter postage

Mailing Address P. O. Box 856042

City State

Zip Code

Louisville

KY

40285

Outstanding Balance Beginning This Period

7616.90

Transaction ID : SD10.224984

Amount Incurred This Period

634.72

Payment This Period

1034.72

Outstanding Balance at Close of This Period

7216.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Sam's Club Discover**

Nature of Debt (Purpose):

Room rental &amp; event catering

Mailing Address P. O. Box 960016

City State

Zip Code

Orlando

FL

32896

Outstanding Balance Beginning This Period

3568.11

Transaction ID : SD10.254506

Amount Incurred This Period

1524.26

Payment This Period

783.18

Outstanding Balance at Close of This Period

4309.19

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Unisource Direct LLC**

Nature of Debt (Purpose):

Direct mail production

Mailing Address 7 North Pinckney St

City

State

Zip Code

Madison

WI

53703

Outstanding Balance Beginning This Period

41508.53

Transaction ID : SD10.224987

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

39008.53

1) **SUBTOTALS** This Period This Page (optional)..... ►

50534.62

2) **TOTALS** This Period (last page this line number only)..... ►

227827.96

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

227827.96

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 119 OF 165

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 REPUBLICAN PARTY OF VIRGINIA INC

NAME OF ACCOUNT  
 Republican Party of Va Non Federal Acct

DATE OF RECEIPT

M M / D D / Y Y Y Y Y  
 08 / 17 / 2012

TOTAL AMOUNT TRANSFERRED

32818.91

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

32818.91

Transaction ID : H3.274367

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

32818.91

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred).....

32818.91

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 120 OF 165

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Virginia Commonwealth Co.</b>			<b>Transaction ID : H4.274093</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 6388								
City Richmond	State VA	Zip Code 23230						
Purpose of Disbursement: Property & liability ins premium			001 Category/ Type			Allocated Activity or Event Year-To-Date 260486.92		
Activity or Event Identifier: Administrative						Date 08 / 01 / 2012		
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
588.96				1047.04			1636.00	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Parkway Parking</b>			<b>Transaction ID : H4.274094</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 72								
City Richmond	State VA	Zip Code 23201						
Purpose of Disbursement: Monthly parking fee			001 Category/ Type			Allocated Activity or Event Year-To-Date 260586.92		
Activity or Event Identifier: Administrative						Date 08 / 01 / 2012		
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
36.00				64.00			100.00	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>De Lage Landen Financial Services</b>			<b>Transaction ID : H4.274095</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 41601								
City Philadelphia	State PA	Zip Code 19101						
Purpose of Disbursement: Copier equipment lease payment			001 Category/ Type			Allocated Activity or Event Year-To-Date 260930.27		
Activity or Event Identifier: Administrative						Date 08 / 01 / 2012		
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
123.61				219.74			343.35	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
748.57		1330.78		2079.35

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>The Printing Center</b>		<b>Transaction ID : H4.274096</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P. O. Box 312				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Springfield	State VA	Zip Code 22150		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office printing supplies		001		Allocated Activity or Event Year-To-Date 261427.97	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 01 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
179.17			318.53		497.70

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Postmaster</b>		<b>Transaction ID : H4.274097</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1801 Brook Road				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Richmond	State VA	Zip Code 23222		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Postage stamps		001		Allocated Activity or Event Year-To-Date 261472.97	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 01 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.20			28.80		45.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Hanover Insurance Co.</b>		<b>Transaction ID : H4.274098</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P. O. Box 580045				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Charlotte	State NC	Zip Code 28258		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Workers Comp ins premium		001		Allocated Activity or Event Year-To-Date 261588.46	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 01 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.58			73.91		115.49

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
236.95		421.24		658.19

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Hanover Insurance Co.</b>		<b>Transaction ID : H4.274099</b>		<b>Allocated Activity or Event:</b>	
Mailing Address P. O. Box 580045				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Charlotte		State NC		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 28258				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Property & liability ins premium		001		Allocated Activity or Event Year-To-Date 262019.98	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 01 / 2012	
FEDERAL SHARE		+		NONFEDERAL SHARE	
155.35				276.17	
		=		TOTAL AMOUNT	
				431.52	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Chain Bridge Bank</b>		<b>Transaction ID : H4.274148</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 1445-A Laughlin Ave				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City McLean		State VA		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 22101				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Bank wiring fee		001		Allocated Activity or Event Year-To-Date 262039.98	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 01 / 2012	
FEDERAL SHARE		+		NONFEDERAL SHARE	
7.20				12.80	
		=		TOTAL AMOUNT	
				20.00	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Purchase Power</b>		<b>Transaction ID : H4.274452</b>		<b>Allocated Activity or Event:</b>	
Mailing Address P. O. Box 856042				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Louisville		State KY		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 40285				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Postage machine replenishment		001		Allocated Activity or Event Year-To-Date 262439.98	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 01 / 2012	
FEDERAL SHARE		+		NONFEDERAL SHARE	
144.00				256.00	
		=		TOTAL AMOUNT	
				400.00	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
306.55		544.97		851.52

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Platinum Plus for Business</b>		<b>Transaction ID : H4.274462</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 15469					
City Wilmington	State DE	Zip Code 19886			
Purpose of Disbursement: Interest charge		001 Category/ Type		Allocated Activity or Event Year-To-Date 262639.98	
Activity or Event Identifier: Administrative				Date 08 / 01 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.00			128.00		200.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Sam's Club Discover</b>		<b>Transaction ID : H4.274465</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 960016					
City Orlando	State FL	Zip Code 32896			
Purpose of Disbursement: Credit card payment-see memo items		001 Category/ Type		Allocated Activity or Event Year-To-Date 262895.99	
Activity or Event Identifier: Administrative				Date 08 / 01 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
92.16			163.85		256.01

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Sam's Club Discover</b>		<b>Transaction ID : H4.274468</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 960016					
City Orlando	State FL	Zip Code 32896			
Purpose of Disbursement: Interest charges		001 Category/ Type		Allocated Activity or Event Year-To-Date 262895.99	
Activity or Event Identifier: Administrative [MEMO ITEM]				Date 08 / 01 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.19			121.22		189.41

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
164.16		291.85		456.01

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>gotomypc.com</b>		<b>Transaction ID : H4.274469</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Main street					
City San Diego	State CA	Zip Code 92169			
Purpose of Disbursement: Internet connection fee		001 Category/ Type		Allocated Activity or Event Year-To-Date 262895.99	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]				Date 08 / 01 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
7.18			12.77		19.95

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Pizza Hut Richmond</b>		<b>Transaction ID : H4.274470</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2343 W. Broad St					
City Richmond	State VA	Zip Code 23220			
Purpose of Disbursement: Meal expense		001 Category/ Type		Allocated Activity or Event Year-To-Date 262895.99	
Activity or Event Identifier: Administrative [MEMO ITEM]				Date 08 / 01 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
16.79			29.86		46.65

<b>C. Full Name (Last, First, Middle Initial)</b> <b>FedEx</b>		<b>Transaction ID : H4.274100</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 1140					
City Memphis	State TN	Zip Code 38101			
Purpose of Disbursement: Shipping charge		001 Category/ Type		Allocated Activity or Event Year-To-Date 263104.02	
Activity or Event Identifier: Administrative				Date 08 / 02 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
74.89			133.14		208.03

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.89		133.14		208.03

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Elavon</b>		<b>Transaction ID : H4.274101</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7300 Chapman Highway					
City Knoxville	State TN	Zip Code 37920			
Purpose of Disbursement: Credit card/merchant fee		001 Category/ Type		Allocated Activity or Event Year-To-Date 263265.40	
Activity or Event Identifier: Administrative				Date 08 / 02 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
58.10			103.28		161.38

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Authorize.net</b>		<b>Transaction ID : H4.274102</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 808 E. Utah Valley Dr					
City American Fork	State UT	Zip Code 84003			
Purpose of Disbursement: Online credit card transaction fee		001 Category/ Type		Allocated Activity or Event Year-To-Date 263295.90	
Activity or Event Identifier: Administrative				Date 08 / 02 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
10.98			19.52		30.50

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Shenandoah Valley Electric</b>		<b>Transaction ID : H4.274103</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10 International Ln					
City Staunton	State VA	Zip Code 24401			
Purpose of Disbursement: Office electric utilities		001 Category/ Type		Allocated Activity or Event Year-To-Date 263606.40	
Activity or Event Identifier: Administrative				Date 08 / 02 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
111.78			198.72		310.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.86		321.52		502.38

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Jet Blue Airlines</b>		<b>Transaction ID : H4.274105</b>		Allocated Activity or Event:	
Mailing Address Logan Intl Airport				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Boston	State MA	Zip Code 02228		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Airfare expense			002	263786.00	
Activity or Event Identifier: Administrative			Category/ Type	Date	
				M M / D D / Y Y Y Y Y Y 08 / 02 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
64.66			114.94		179.60

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Staples Store</b>		<b>Transaction ID : H4.274106</b>		Allocated Activity or Event:	
Mailing Address 8045 W. Broad Street				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Richmond	State VA	Zip Code 23229		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Office supplies			001	263959.85	
Activity or Event Identifier: Administrative			Category/ Type	Date	
				M M / D D / Y Y Y Y Y Y 08 / 02 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
62.59			111.26		173.85

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Pitney Bowes, Inc.</b>		<b>Transaction ID : H4.274107</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 85390				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Louisville	State KY	Zip Code 40285		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Postage machine lease payment			001	265444.88	
Activity or Event Identifier: Administrative			Category/ Type	Date	
				M M / D D / Y Y Y Y Y Y 08 / 03 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
534.61			950.42		1485.03

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
661.86		1176.62		1838.48

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>City of Richmond</b>		<b>Transaction ID : H4.274108</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 26060				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Richmond		State VA	Zip Code 23274	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office utilities				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		001		Allocated Activity or Event Year-To-Date 265875.70	
		Category/ Type		Date 08 / 03 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.10			275.72		430.82

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Verizon Wireless</b>		<b>Transaction ID : H4.274109</b>		Allocated Activity or Event:	
Mailing Address P O Box 17464				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Baltimore		State MD	Zip Code 21297	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Monthly cell phone service				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		001		Allocated Activity or Event Year-To-Date 266315.27	
		Category/ Type		Date 08 / 03 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
158.25			281.32		439.57

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Mr. David A Rexrode</b>		<b>Transaction ID : H4.274379</b>		Allocated Activity or Event:	
Mailing Address 52 Tanterra Drive				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Stafford		State VA	Zip Code 22556	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Employee reimbursement-see memo item				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		001		Allocated Activity or Event Year-To-Date 266889.59	
		Category/ Type		Date 08 / 03 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
206.76			367.56		574.32

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
520.11		924.60		1444.71

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>SupplyNet Inc</b>		<b>Transaction ID : H4.274381</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 614 Corporate Way					
City Valley Cottage	State NY	Zip Code 10989			
Purpose of Disbursement: Office scanner		001 Category/ Type		Allocated Activity or Event Year-To-Date 0.00	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]				Date 08 / 03 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
99.46			176.81		276.27

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Staples Store</b>		<b>Transaction ID : H4.274383</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8045 W. Broad Street					
City Richmond	State VA	Zip Code 23229			
Purpose of Disbursement: Office supplies		001 Category/ Type		Allocated Activity or Event Year-To-Date 0.00	
Activity or Event Identifier: Administrative [MEMO ITEM]				Date 08 / 03 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
107.30			190.75		298.05

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Canon Financial Services</b>		<b>Transaction ID : H4.274110</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 14904 Collections Center Dr					
City Chicago	State IL	Zip Code 60693			
Purpose of Disbursement: Copier equipment lease payment		001 Category/ Type		Allocated Activity or Event Year-To-Date 267535.34	
Activity or Event Identifier: Administrative				Date 08 / 06 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
232.47			413.28		645.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
232.47		413.28		645.75

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Cox Communications</b>		<b>Transaction ID : H4.274111</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 183124					
City Columbus	State OH	Zip Code 43218			
Purpose of Disbursement: Office internet service		001 Category/ Type		Allocated Activity or Event Year-To-Date 267715.33	
Activity or Event Identifier: Administrative				Date 08 / 06 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
64.80			115.19		179.99

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Dominion Virginia Power</b>		<b>Transaction ID : H4.274112</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 26543					
City Richmond	State VA	Zip Code 23290			
Purpose of Disbursement: Office electric utilities		001 Category/ Type		Allocated Activity or Event Year-To-Date 268511.36	
Activity or Event Identifier: Administrative				Date 08 / 06 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
286.57			509.46		796.03

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Supply Room Companies</b>		<b>Transaction ID : H4.274113</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 14140 Washington Hwy P. O. Box 1810					
City Ashland	State VA	Zip Code 23005			
Purpose of Disbursement: Office supplies		001 Category/ Type		Allocated Activity or Event Year-To-Date 268538.36	
Activity or Event Identifier: Administrative				Date 08 / 06 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
9.72			17.28		27.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
361.09		641.93		1003.02

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Verizon</b>		<b>Transaction ID : H4.274114</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 17398					
City Baltimore	State MD	Zip Code 21297			
Purpose of Disbursement: Office monthly phone service		001		Allocated Activity or Event Year-To-Date 268926.34	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 06 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
139.67			248.31		387.98

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Cox Communications</b>		<b>Transaction ID : H4.274115</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 183124					
City Columbus	State OH	Zip Code 43218			
Purpose of Disbursement: Office internet service		001		Allocated Activity or Event Year-To-Date 269155.34	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 06 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
82.44			146.56		229.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Staples Store</b>		<b>Transaction ID : H4.274116</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8045 W. Broad Street					
City Richmond	State VA	Zip Code 23229			
Purpose of Disbursement: Office supplies		001		Allocated Activity or Event Year-To-Date 270150.38	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 06 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
358.21			636.83		995.04

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
580.32		1031.70		1612.02

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Wells Fargo Bank</b>		<b>Transaction ID : H4.274881</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1021 E. Cary St.					
City Richmond	State VA	Zip Code 23219			
Purpose of Disbursement: Service charge		001		Allocated Activity or Event Year-To-Date 270201.18	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 06 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
18.29			32.51		50.80

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Walmart Superstore</b>		<b>Transaction ID : H4.274883</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11400 West Broad Street					
City Glen Allen	State VA	Zip Code 23060			
Purpose of Disbursement: Office supplies		001		Allocated Activity or Event Year-To-Date 270498.48	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 06 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
107.03			190.27		297.30

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Staples Ric</b>		<b>Transaction ID : H4.274884</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8988 W Broad Street					
City Richmond	State VA	Zip Code 23229			
Purpose of Disbursement: Office supplies		001		Allocated Activity or Event Year-To-Date 270638.91	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 06 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
50.55			89.88		140.43

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
175.87		312.66		488.53

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Cox Communications</b>		<b>Transaction ID : H4.274117</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P. O. Box 183124				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Columbus	State OH	Zip Code 43218		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office internet service		001		Allocated Activity or Event Year-To-Date 271056.91	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 08 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
150.48			267.52		418.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>James E Hicks III</b>		<b>Transaction ID : H4.274118</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 145 Fairview Rd				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Newport News	State VA	Zip Code 23606		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Website server storage fee		001		Allocated Activity or Event Year-To-Date 271281.91	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 08 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.00			144.00		225.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Comcast Cable</b>		<b>Transaction ID : H4.274119</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 918 N Boulevard				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Richmond	State VA	Zip Code 23230		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office internet service		001		Allocated Activity or Event Year-To-Date 271494.16	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 08 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
76.41			135.84		212.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
307.89		547.36		855.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Property Services Inc</b>		<b>Transaction ID : H4.274120</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6320 Augusta Dr					
City Springfield	State VA	Zip Code 22150			
Purpose of Disbursement: Office lease payment		001		Allocated Activity or Event Year-To-Date 274082.08	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 08 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
931.65			1656.27		2587.92

<b>B. Full Name (Last, First, Middle Initial)</b> <b>City of Winchester</b>		<b>Transaction ID : H4.274121</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 75					
City Winchester	State VA	Zip Code 22604			
Purpose of Disbursement: Office utilities		001		Allocated Activity or Event Year-To-Date 274172.08	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 09 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
32.40			57.60		90.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Bunkie Trinite Trophies</b>		<b>Transaction ID : H4.274123</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 12 East Grace Street					
City Richmond	State VA	Zip Code 23219			
Purpose of Disbursement: Office supplies		001		Allocated Activity or Event Year-To-Date 274186.78	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 09 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
5.29			9.41		14.70

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
969.34		1723.28		2692.62

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Dominion Virginia Power</b>		<b>Transaction ID : H4.274124</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P. O. Box 26543				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Richmond	State VA	Zip Code 23290	<input type="checkbox"/> Public Comm (ref to party only) by PAC		
Purpose of Disbursement: Office electric utilities		001		Allocated Activity or Event Year-To-Date 274532.56	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 09 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
124.48			221.30		345.78

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Comcast Cable</b>		<b>Transaction ID : H4.274125</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 918 N Boulevard				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Richmond	State VA	Zip Code 23230	<input type="checkbox"/> Public Comm (ref to party only) by PAC		
Purpose of Disbursement: Office internet service		001		Allocated Activity or Event Year-To-Date 275156.06	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 10 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
224.46			399.04		623.50

<b>C. Full Name (Last, First, Middle Initial)</b> <b>FedEx</b>		<b>Transaction ID : H4.274126</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P. O. Box 1140				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Memphis	State TN	Zip Code 38101	<input type="checkbox"/> Public Comm (ref to party only) by PAC		
Purpose of Disbursement: Shipping charge		001		Allocated Activity or Event Year-To-Date 275315.45	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 10 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
57.38			102.01		159.39

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
406.32		722.35		1128.67

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Appalachian Power</b>		<b>Transaction ID : H4.274127</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 24413					
City Canton	State OH	Zip Code 44701			
Purpose of Disbursement: Office utilities		001 Category/ Type		Allocated Activity or Event Year-To-Date 275640.69	
Activity or Event Identifier: Administrative				Date 08 / 10 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
117.09			208.15		325.24

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Comcast Cable</b>		<b>Transaction ID : H4.274128</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 918 N Boulevard					
City Richmond	State VA	Zip Code 23230			
Purpose of Disbursement: Office internet service		001 Category/ Type		Allocated Activity or Event Year-To-Date 275852.94	
Activity or Event Identifier: Administrative				Date 08 / 10 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
76.41			135.84		212.25

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Verizon</b>		<b>Transaction ID : H4.274129</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 17398					
City Baltimore	State MD	Zip Code 21297			
Purpose of Disbursement: Office internet service		001 Category/ Type		Allocated Activity or Event Year-To-Date 275987.93	
Activity or Event Identifier: Administrative				Date 08 / 10 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
48.60			86.39		134.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
242.10		430.38		672.48

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Staples Store</b>		<b>Transaction ID : H4.274130</b>		Allocated Activity or Event:	
Mailing Address 8045 W. Broad Street				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Richmond		State VA	Zip Code 23229	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office supplies				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		001		Allocated Activity or Event Year-To-Date	
		Category/ Type		276047.34	
				Date 08 / 10 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.39			38.02		59.41

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Staples Store</b>		<b>Transaction ID : H4.274131</b>		Allocated Activity or Event:	
Mailing Address 8045 W. Broad Street				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Richmond		State VA	Zip Code 23229	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office supplies				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		001		Allocated Activity or Event Year-To-Date	
		Category/ Type		276463.09	
				Date 08 / 13 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
149.67			266.08		415.75

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Cox Communications</b>		<b>Transaction ID : H4.274132</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 183124				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Columbus		State OH	Zip Code 43218	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office internet service				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		001		Allocated Activity or Event Year-To-Date	
		Category/ Type		276640.14	
				Date 08 / 13 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.74			113.31		177.05

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
234.80		417.41		652.21

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Dominion Virginia Power</b>		<b>Transaction ID : H4.274133</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 26543				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Richmond	State VA	Zip Code 23290			
Purpose of Disbursement: Office electric utilities		001		Allocated Activity or Event Year-To-Date 277040.34	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 13 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
144.07			256.13		400.20

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Washington Gas</b>		<b>Transaction ID : H4.274134</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 37747				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Philadelphia	State PA	Zip Code 19101			
Purpose of Disbursement: Office utilities		001		Allocated Activity or Event Year-To-Date 277125.34	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 13 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.60			54.40		85.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Windstream</b>		<b>Transaction ID : H4.274135</b>		Allocated Activity or Event:	
Mailing Address 2704 ALT 19				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Palm Harbor	State FL	Zip Code 34683			
Purpose of Disbursement: Office wireless internet		001		Allocated Activity or Event Year-To-Date 277188.04	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 13 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.57			40.13		62.70

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
197.24		350.66		547.90

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Quickbooks Payroll Service</b>		<b>Transaction ID : H4.274137</b>		<b>Allocated Activity or Event:</b>	
Mailing Address P. O. Box 6170				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Fredericksburg State VA Zip Code 22403				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Payroll service fee		001		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Allocated Activity or Event Year-To-Date 277305.44	
				Date 08 / 14 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.26			75.14		117.40

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Chesley K Edmunds</b>		<b>Transaction ID : H4.274392</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 3800 Somerbrook Ct				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Henrico State VA Zip Code 23233				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Employee reimbursement-see memo items		001		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 277709.74	
				Date 08 / 14 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.55			258.75		404.30

<b>C. Full Name (Last, First, Middle Initial)</b> <b>FedEx</b>		<b>Transaction ID : H4.274393</b>		<b>Allocated Activity or Event:</b>	
Mailing Address P. O. Box 1140				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Memphis State TN Zip Code 38101				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Shipping charge		001		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 0.00	
[MEMO ITEM]				Date 08 / 14 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.29			149.86		234.15

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
187.81		333.89		521.70

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 139 OF 165

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Walmart Superstore</b>		<b>Transaction ID : H4.274394</b>		Allocated Activity or Event:	
Mailing Address 11400 West Broad Street				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code Glen Allen VA 23060				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office supplies		001		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM]				<div> <div>08</div> <div>14</div> <div>2012</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.45			59.46		92.91

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Staples Store</b>		<b>Transaction ID : H4.274395</b>		Allocated Activity or Event:	
Mailing Address 8045 W. Broad Street				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code Richmond VA 23229				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office supplies		001		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM]				<div> <div>08</div> <div>14</div> <div>2012</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.81			49.43		77.24

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Walmart Superstore</b>		<b>Transaction ID : H4.274396</b>		Allocated Activity or Event:	
Mailing Address 11400 West Broad Street				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code Glen Allen VA 23060				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office supplies		001		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				277764.33	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.65			34.94		54.59

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.65		34.94		54.59

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Hootsuite Media Inc</b>		<b>Transaction ID : H4.274138</b>		Allocated Activity or Event:	
Mailing Address 37 Dunlevy Ave				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Vancouver		State ZZ		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Communications fee		001		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative		Category/ Type		277770.32	
Date		08 / 15 / 2012			
FEDERAL SHARE		+		NONFEDERAL SHARE	
2.16				3.83	
		=		TOTAL AMOUNT	
				5.99	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>FedEx</b>		<b>Transaction ID : H4.274139</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 1140				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Memphis		State TN		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 38101				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Shipping charge		001		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative		Category/ Type		277947.11	
Date		08 / 16 / 2012			
FEDERAL SHARE		+		NONFEDERAL SHARE	
63.64				113.15	
		=		TOTAL AMOUNT	
				176.79	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Deluxe Checks</b>		<b>Transaction ID : H4.274140</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 1186				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Lancaster		State CA		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 93584				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Checks for checking account		001		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative		Category/ Type		278363.91	
Date		08 / 16 / 2012			
FEDERAL SHARE		+		NONFEDERAL SHARE	
150.05				266.75	
		=		TOTAL AMOUNT	
				416.80	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
215.85		383.73		599.58

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Clearwire Communications</b>		<b>Transaction ID : H4.274141</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1420 N. Parham Rd					
City Henrico	State VA	Zip Code 23229			
Purpose of Disbursement: Office wireless internet		001		Allocated Activity or Event Year-To-Date 278463.89	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
35.99			63.99		99.98

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Staples Store</b>		<b>Transaction ID : H4.274142</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8045 W. Broad Street					
City Richmond	State VA	Zip Code 23229			
Purpose of Disbursement: Office supplies		001		Allocated Activity or Event Year-To-Date 278890.98	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
153.75			273.34		427.09

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Comcast Cable</b>		<b>Transaction ID : H4.274143</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 918 N Boulevard					
City Richmond	State VA	Zip Code 23230			
Purpose of Disbursement: Office internet service		001		Allocated Activity or Event Year-To-Date 279098.71	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
74.78			132.95		207.73

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
264.52		470.28		734.80

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>ECB Security Technologies</b>		<b>Transaction ID : H4.274144</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8390 Britteewood Cir					
City Mechanicsville	State VA	Zip Code 23116			
Purpose of Disbursement: Building security fee		001		Allocated Activity or Event Year-To-Date 279123.66	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
8.98			15.97		24.95

<b>B. Full Name (Last, First, Middle Initial)</b> <b>City of Danville</b>		<b>Transaction ID : H4.274149</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 515 Main Street					
City Danville	State VA	Zip Code 24541			
Purpose of Disbursement: Office utilities		001		Allocated Activity or Event Year-To-Date 279371.56	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
89.24			158.66		247.90

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Comcast Cable</b>		<b>Transaction ID : H4.274150</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 918 N Boulevard					
City Richmond	State VA	Zip Code 23230			
Purpose of Disbursement: Office internet service		001		Allocated Activity or Event Year-To-Date 279483.81	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
40.41			71.84		112.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
138.63		246.47		385.10

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Event Technologies Inc</b>		<b>Transaction ID : H4.274151</b>		Allocated Activity or Event:	
Mailing Address 11020 Leadbetter Rd				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code			
Ashland	VA	23005			
Purpose of Disbursement: Sound equipment rental			001	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative				<div> <div>08</div> <div>16</div> <div>2012</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
522.00			928.00		1450.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Roadrunner LLC</b>		<b>Transaction ID : H4.274153</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 370				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code			
McLean	VA	22101			
Purpose of Disbursement: Office lease payment			001	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative				<div> <div>08</div> <div>16</div> <div>2012</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
540.00			960.00		1500.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Richland Investment Group</b>		<b>Transaction ID : H4.274154</b>		Allocated Activity or Event:	
Mailing Address 21430 Cedar Dr				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code			
Sterling	VA	20164			
Purpose of Disbursement: Office lease payment			001	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative				<div> <div>08</div> <div>16</div> <div>2012</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2880.00			5120.00		8000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3942.00		7008.00		10950.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Kroger</b>		<b>Transaction ID : H4.274092</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 901 N. Lombardy St.					
City Richmond	State VA	Zip Code 23219			
Purpose of Disbursement: Office food supplies		001 Category/ Type		Allocated Activity or Event Year-To-Date 290454.57	
Activity or Event Identifier: Administrative				Date 08 / 17 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
7.47			13.29		20.76

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Cox Communications</b>		<b>Transaction ID : H4.274146</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 183124					
City Columbus	State OH	Zip Code 43218			
Purpose of Disbursement: Office internet service		001 Category/ Type		Allocated Activity or Event Year-To-Date 290664.56	
Activity or Event Identifier: Administrative				Date 08 / 17 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
75.60			134.39		209.99

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Washington Gas</b>		<b>Transaction ID : H4.274147</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 37747					
City Philadelphia	State PA	Zip Code 19101			
Purpose of Disbursement: Office utilities		001 Category/ Type		Allocated Activity or Event Year-To-Date 290688.36	
Activity or Event Identifier: Administrative				Date 08 / 17 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
8.57			15.23		23.80

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.64		162.91		254.55

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Marriott-Tampa</b>		<b>Transaction ID : H4.274873</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 700 S. Florida Ave					
City Tampa	State FL	Zip Code 33602			
Purpose of Disbursement: Lodging expense		002		Allocated Activity or Event Year-To-Date 291688.36	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 17 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
360.00			640.00		1000.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>American Express</b>		<b>Transaction ID : H4.274158</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P O Box 53852					
City Phoenix	State AZ	Zip Code 85072			
Purpose of Disbursement: Credit card/merchant fee		001		Allocated Activity or Event Year-To-Date 291696.31	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 20 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
2.86			5.09		7.95

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Anywhere Tours of Florida</b>		<b>Transaction ID : H4.274159</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11802 US Highway 301N					
City Thonotosassa	State FL	Zip Code 33592			
Purpose of Disbursement: Bus rental expense		001		Allocated Activity or Event Year-To-Date 299486.31	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 20 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
2804.40			4985.60		7790.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3167.26		5630.69		8797.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Staples Store</b>		<b>Transaction ID : H4.274161</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 8045 W. Broad Street				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Richmond		State VA		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 23229				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office supplies		001		Allocated Activity or Event Year-To-Date 300034.63	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 21 / 2012	
FEDERAL SHARE		+		NONFEDERAL SHARE	
197.40				350.92	
		=		TOTAL AMOUNT	
				548.32	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Shred-It</b>		<b>Transaction ID : H4.274162</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 2350 Aluminum Dr				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Hampton		State VA		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 23661				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office shredding service		001		Allocated Activity or Event Year-To-Date 300069.63	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 21 / 2012	
FEDERAL SHARE		+		NONFEDERAL SHARE	
12.60				22.40	
		=		TOTAL AMOUNT	
				35.00	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Aviva Rental Systems LLC</b>		<b>Transaction ID : H4.274173</b>		<b>Allocated Activity or Event:</b>	
Mailing Address P. O. Box 17113				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Richmond		State VA		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 23226				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Projection equipment rental		001		Allocated Activity or Event Year-To-Date 302980.03	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 21 / 2012	
FEDERAL SHARE		+		NONFEDERAL SHARE	
1047.74				1862.66	
		=		TOTAL AMOUNT	
				2910.40	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1257.74		2235.98		3493.72

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Comcast Cable</b>		<b>Transaction ID : H4.274174</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 918 N Boulevard				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Richmond State VA Zip Code 23230				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office internet service		001		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Allocated Activity or Event Year-To-Date 303638.01	
				Date 08 / 21 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
236.87			421.11		657.98

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Staples Store</b>		<b>Transaction ID : H4.274175</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 8045 W. Broad Street				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Richmond State VA Zip Code 23229				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office supplies		001		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 303913.94	
				Date 08 / 21 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.33			176.60		275.93

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Pinmart</b>		<b>Transaction ID : H4.274176</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 1842 S. Elmhurst Rd				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Mount Prospect State IL Zip Code 60056				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office supplies		001		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 304363.94	
				Date 08 / 21 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
162.00			288.00		450.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
498.20		885.71		1383.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>American Express</b>		<b>Transaction ID : H4.274178</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P O Box 53852					
City Phoenix	State AZ	Zip Code 85072			
Purpose of Disbursement: Credit card/merchant fee		001		Allocated Activity or Event Year-To-Date 304397.23	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 22 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
11.98			21.31		33.29

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Comcast Cable</b>		<b>Transaction ID : H4.274179</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 918 N Boulevard					
City Richmond	State VA	Zip Code 23230			
Purpose of Disbursement: Office internet service		001		Allocated Activity or Event Year-To-Date 304787.20	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 22 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
140.39			249.58		389.97

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Wells Fargo Bank</b>		<b>Transaction ID : H4.274273</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1021 E. Cary St.					
City Richmond	State VA	Zip Code 23219			
Purpose of Disbursement: Service charge		001		Allocated Activity or Event Year-To-Date 304791.15	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 22 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1.42			2.53		3.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
153.79		273.42		427.21

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Wells Fargo Bank</b>		<b>Transaction ID : H4.274882</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1021 E. Cary St.					
City Richmond	State VA	Zip Code 23219			
Purpose of Disbursement: Service charge		001		Allocated Activity or Event Year-To-Date 304826.15	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 22 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
12.60			22.40		35.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Staples-Willow Lawn</b>		<b>Transaction ID : H4.274156</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1601 Willow Lawn Drive Suite 304					
City Richmond	State VA	Zip Code 23230			
Purpose of Disbursement: Office supplies		001		Allocated Activity or Event Year-To-Date 304929.12	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 23 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
37.07			65.90		102.97

<b>C. Full Name (Last, First, Middle Initial)</b> <b>BVU OptiNet</b>		<b>Transaction ID : H4.274180</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 8100					
City Bristol	State VA	Zip Code 24203			
Purpose of Disbursement: Office internet service		001		Allocated Activity or Event Year-To-Date 305064.07	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 23 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
48.58			86.37		134.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.25		174.67		272.92

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>AT&amp;T Store</b>		<b>Transaction ID : H4.274181</b>		Allocated Activity or Event:	
Mailing Address 7260 Mechanicsville Tnpk				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Mechanicsville	State VA	Zip Code 23111		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Monthly cell phone service		001		305912.07	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 08 / 23 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
305.28			542.72		848.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>FedEx</b>		<b>Transaction ID : H4.274182</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 1140				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Memphis	State TN	Zip Code 38101		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Shipping charge		001		306252.91	
Activity or Event Identifier: Administrative		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 08 / 23 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
122.70			218.14		340.84

<b>C. Full Name (Last, First, Middle Initial)</b> <b>United Cab</b>		<b>Transaction ID : H4.274183</b>		Allocated Activity or Event:	
Mailing Address 1701 W. Cass St				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Tampa	State FL	Zip Code 33606		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: travel expense		002		306312.71	
Activity or Event Identifier: Administrative		Category/ Type		Date	
				M M / D D / Y Y Y Y Y Y 08 / 24 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.53			38.27		59.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
449.51		799.13		1248.64

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Staples-Willow Lawn</b>		<b>Transaction ID : H4.274157</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1601 Willow Lawn Drive Suite 304				Allocated Activity or Event Year-To-Date 306337.90	
City Richmond	State VA	Zip Code 23230		Date MM / DD / YYYY 08 / 27 / 2012	
Purpose of Disbursement: Office supplies		001			
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
9.07			16.12		25.19

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Marriott-Tampa</b>		<b>Transaction ID : H4.274185</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 700 S. Florida Ave				Allocated Activity or Event Year-To-Date 308721.70	
City Tampa	State FL	Zip Code 33602		Date MM / DD / YYYY 08 / 27 / 2012	
Purpose of Disbursement: Lodging expense		002			
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
858.17			1525.63		2383.80

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Walgreens</b>		<b>Transaction ID : H4.274187</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5802 West Broad Street				Allocated Activity or Event Year-To-Date 308738.27	
City Richmond	State VA	Zip Code 23230		Date MM / DD / YYYY 08 / 27 / 2012	
Purpose of Disbursement: Office housekeeping supplies		001			
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
5.97			10.60		16.57

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
873.21		1552.35		2425.56

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>FedEx</b>		<b>Transaction ID : H4.274188</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 1140				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Memphis		State TN	Zip Code 38101	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Shipping charge				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		001		Allocated Activity or Event Year-To-Date 308962.22	
Date		08 / 27 / 2012			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.62			143.33		223.95

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Netdefender</b>		<b>Transaction ID : H4.274189</b>		Allocated Activity or Event:	
Mailing Address 1380 Central Park Blvd Ste 210				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Fredericksburg		State VA	Zip Code 22401	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office internet service				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		001		Allocated Activity or Event Year-To-Date 309141.22	
Date		08 / 27 / 2012			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.44			114.56		179.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Verizon</b>		<b>Transaction ID : H4.274190</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 17398				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Baltimore		State MD	Zip Code 21297	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office internet service				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		001		Allocated Activity or Event Year-To-Date 309296.21	
Date		08 / 27 / 2012			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.80			99.19		154.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
200.86		357.08		557.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Canon Business Solutions</b>		<b>Transaction ID : H4.274191</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 15004 Collections Center Dr					
City Chicago	State IL	Zip Code 60693			
Purpose of Disbursement: Copier equipment service fee		001		Allocated Activity or Event Year-To-Date 309685.72	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
140.22			249.29		389.51

<b>B. Full Name (Last, First, Middle Initial)</b> <b>HRUBS</b>		<b>Transaction ID : H4.274192</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 71092					
City Charlotte	State NC	Zip Code 28272			
Purpose of Disbursement: Office water utilities		001		Allocated Activity or Event Year-To-Date 309767.38	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
29.40			52.26		81.66

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Comcast Cable</b>		<b>Transaction ID : H4.274193</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 918 N Boulevard					
City Richmond	State VA	Zip Code 23230			
Purpose of Disbursement: Office internet service		001		Allocated Activity or Event Year-To-Date 309979.63	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
76.41			135.84		212.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
246.03		437.39		683.42

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Purchase Power</b>		<b>Transaction ID : H4.274453</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 856042					
City Louisville	State KY	Zip Code 40285			
Purpose of Disbursement: Postage machine replenishment		001		Allocated Activity or Event Year-To-Date 310614.35	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 08 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
228.50			406.22		634.72

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Sam's Club Discover</b>		<b>Transaction ID : H4.274466</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 960016					
City Orlando	State FL	Zip Code 32896			
Purpose of Disbursement: Credit card payment-see memo items		001		Allocated Activity or Event Year-To-Date 311141.52	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
189.78			337.39		527.17

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Sam's Club Discover</b>		<b>Transaction ID : H4.274471</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 960016					
City Orlando	State FL	Zip Code 32896			
Purpose of Disbursement: Interest charges		001		Allocated Activity or Event Year-To-Date 311141.52	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 27 / 2012	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
57.79			102.75		160.54

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
418.28		743.61		1161.89

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>gotomypc.com</b>		<b>Transaction ID : H4.274472</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Main street					
City San Diego	State CA	Zip Code 92169			
Purpose of Disbursement: Internet connection fee		001 Category/ Type		Allocated Activity or Event Year-To-Date 311141.52	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]				Date 08 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
7.18			12.77		19.95

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Crucial.com</b>		<b>Transaction ID : H4.274473</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3475 E. Commercial Ct					
City Meridian	State ID	Zip Code 83642			
Purpose of Disbursement: Computer memory upgrade		001 Category/ Type		Allocated Activity or Event Year-To-Date 311141.52	
Activity or Event Identifier: Administrative [MEMO ITEM]				Date 08 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
31.64			56.25		87.89

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Godaddy.com</b>		<b>Transaction ID : H4.274475</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 14455 N. Hayden Rd					
City Scottsdale	State AZ	Zip Code 85260			
Purpose of Disbursement: Website domain names		001 Category/ Type		Allocated Activity or Event Year-To-Date 311141.52	
Activity or Event Identifier: Administrative [MEMO ITEM]				Date 08 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
28.51			50.68		79.19

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Jet Blue Airlines</b>		<b>Transaction ID : H4.274476</b>		Allocated Activity or Event:	
Mailing Address Logan Intl Airport				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Boston		State MA		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 02228				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Airfare expense		002		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		311141.52	
[MEMO ITEM]				Date 08 / 27 / 2012	
FEDERAL SHARE		+		NONFEDERAL SHARE	
64.66				114.94	
		=		TOTAL AMOUNT	
				179.60	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Total Wine and More</b>		<b>Transaction ID : H4.274477</b>		Allocated Activity or Event:	
Mailing Address 8099 W. Broad St				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Richmond		State VA		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Catering for Virginia delegation		001		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative		Category/ Type		311777.42	
				Date 08 / 27 / 2012	
FEDERAL SHARE		+		NONFEDERAL SHARE	
228.92				406.98	
		=		TOTAL AMOUNT	
				635.90	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Bern's Steak House</b>		<b>Transaction ID : H4.274478</b>		Allocated Activity or Event:	
Mailing Address 1208 S. Howard Ave				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Tampa		State FL		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 33606				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Catering for Virginia delegation		001		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative		Category/ Type		315261.41	
				Date 08 / 27 / 2012	
FEDERAL SHARE		+		NONFEDERAL SHARE	
1254.24				2229.75	
		=		TOTAL AMOUNT	
				3483.99	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1483.16		2636.73		4119.89

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>.com Properties LLC</b>		<b>Transaction ID : H4.274194</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1401 Coulter Dr NW					
City Roanoke	State VA	Zip Code 24012			
Purpose of Disbursement: Office lease payment		001		Allocated Activity or Event Year-To-Date 316511.41	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 28 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
450.00			800.00		1250.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Barong Real Estate Assoc. LLC</b>		<b>Transaction ID : H4.274195</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1215 Hermitage Rd					
City Richmond	State VA	Zip Code 23220			
Purpose of Disbursement: Office lease payment		001		Allocated Activity or Event Year-To-Date 318192.41	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 28 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
605.16			1075.84		1681.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>BLJV LLC</b>		<b>Transaction ID : H4.274196</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8405 Greensboro Dr					
City McLean	State VA	Zip Code 22102			
Purpose of Disbursement: Office lease payment		001		Allocated Activity or Event Year-To-Date 319692.41	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 28 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
540.00			960.00		1500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1595.16		2835.84		4431.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Festival Park LLC</b>		<b>Transaction ID : H4.274197</b>		Allocated Activity or Event:	
Mailing Address 11936-A Centre St				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Chester	State VA	Zip Code 23831			
Purpose of Disbursement: Office lease payment		001		Allocated Activity or Event Year-To-Date 321192.41	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 28 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
540.00			960.00		1500.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Fredericksburg 35 LLC</b>		<b>Transaction ID : H4.274198</b>		Allocated Activity or Event:	
Mailing Address 8405 Greensboro Dr				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City McLean	State VA	Zip Code 22102			
Purpose of Disbursement: Office lease payment		001		Allocated Activity or Event Year-To-Date 321692.41	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 28 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
180.00			320.00		500.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>KUW LLC</b>		<b>Transaction ID : H4.274199</b>		Allocated Activity or Event:	
Mailing Address 915 First Colonial Rd				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Virginia Beach	State VA	Zip Code 23454			
Purpose of Disbursement: Office lease payment		001		Allocated Activity or Event Year-To-Date 322692.41	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 28 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
360.00			640.00		1000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1080.00		1920.00		3000.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>LU Clanders Station Holdings LLC</b>			<b>Transaction ID : H4.274200</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1971 University Blvd								
City Lynchburg		State VA		Zip Code 24502				
Purpose of Disbursement: Office lease payment				001		Allocated Activity or Event Year-To-Date 322942.41		
Activity or Event Identifier: Administrative						Date 08 / 28 / 2012		
FEDERAL SHARE			+			NONFEDERAL SHARE		
90.00						160.00		
			=			TOTAL AMOUNT		
						250.00		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Patriot Group</b>			<b>Transaction ID : H4.274202</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. 14414								
City Newport News		State VA		Zip Code 23608				
Purpose of Disbursement: Office lease payment				001		Allocated Activity or Event Year-To-Date 323942.41		
Activity or Event Identifier: Administrative						Date 08 / 28 / 2012		
FEDERAL SHARE			+			NONFEDERAL SHARE		
360.00						640.00		
			=			TOTAL AMOUNT		
						1000.00		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Phoenix Commercial Real Estate</b>			<b>Transaction ID : H4.274203</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1602 Village Market Blvd Suite 235								
City Leesburg		State VA		Zip Code 20175				
Purpose of Disbursement: Office lease payment				001		Allocated Activity or Event Year-To-Date 325442.41		
Activity or Event Identifier: Administrative						Date 08 / 28 / 2012		
FEDERAL SHARE			+			NONFEDERAL SHARE		
540.00						960.00		
			=			TOTAL AMOUNT		
						1500.00		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
990.00		1760.00		2750.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Property Services Inc</b>		<b>Transaction ID : H4.274204</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6320 Augusta Dr					
City Springfield	State VA	Zip Code 22150			
Purpose of Disbursement: Office lease payment		001 Category/ Type		Allocated Activity or Event Year-To-Date 328030.33	
Activity or Event Identifier: Administrative				Date 08 / 28 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
931.65			1656.27		2587.92

<b>B. Full Name (Last, First, Middle Initial)</b> <b>R. E. Collier of Virginia LLC</b>		<b>Transaction ID : H4.274205</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9415 Hull Street Rd					
City Richmond	State VA	Zip Code 23236			
Purpose of Disbursement: Office lease payment		001 Category/ Type		Allocated Activity or Event Year-To-Date 328750.33	
Activity or Event Identifier: Administrative				Date 08 / 28 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
259.20			460.80		720.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Richland Investment Group</b>		<b>Transaction ID : H4.274206</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 21430 Cedar Dr					
City Sterling	State VA	Zip Code 20164			
Purpose of Disbursement: Office lease payment		001 Category/ Type		Allocated Activity or Event Year-To-Date 330750.33	
Activity or Event Identifier: Administrative				Date 08 / 28 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
720.00			1280.00		2000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1910.85		3397.07		5307.92

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Dell Computers</b>		<b>Transaction ID : H4.274207</b>		Allocated Activity or Event:	
Mailing Address One Dell Way				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code			
Round Rock	TX	78682			
Purpose of Disbursement: Office computer equipment			001	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative				<div> <div>331540.53</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
284.47			505.73		790.20

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Jan-Pro</b>		<b>Transaction ID : H4.274208</b>		Allocated Activity or Event:	
Mailing Address 5206 Markel Rd				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code			
Richmond	VA	23230			
Purpose of Disbursement: Office janitorial service			001	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative				<div> <div>331852.53</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
112.32			199.68		312.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Quickbooks Payroll Service</b>		<b>Transaction ID : H4.274209</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 6170				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code			
Fredericksburg	VA	22403			
Purpose of Disbursement: payroll service fee			001	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative				<div> <div>331890.93</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.82			24.58		38.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
410.61		729.99		1140.60

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Mr. Louis Fortier</b>		<b>Transaction ID : H4.274432</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 716 Prince Charles Lane					
City Virginia Beach	State VA	Zip Code 23452			
Purpose of Disbursement: Employee reimbursement-see memo item		001		Allocated Activity or Event Year-To-Date 332100.91	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 08 / 30 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
75.59			134.39		209.98

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Hewlett Packard Business Systems</b>		<b>Transaction ID : H4.274433</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P O Box 60000					
City San Francisco	State CA	Zip Code 94160-3703			
Purpose of Disbursement: Printer cartridge		001		Allocated Activity or Event Year-To-Date 0.00	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 30 / 2012	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
75.59			134.39		209.98

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Festival Park LLC</b>		<b>Transaction ID : H4.274438</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11936-A Centre St					
City Chester	State VA	Zip Code 23831			
Purpose of Disbursement: Office water & utilities		001		Allocated Activity or Event Year-To-Date 332465.84	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 30 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
131.37			233.56		364.93

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
206.96		367.95		574.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>FedEx</b>		<b>Transaction ID : H4.274439</b>		Allocated Activity or Event:	
Mailing Address P. O. Box 1140				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Memphis		State TN	Zip Code 38101	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Shipping charge				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		001		Allocated Activity or Event Year-To-Date 333000.50	
		Category/ Type		Date 08 / 30 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
192.48			342.18		534.66

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Chain Bridge Bank</b>		<b>Transaction ID : H4.274440</b>		Allocated Activity or Event:	
Mailing Address 1445-A Laughlin Ave				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City McLean		State VA	Zip Code 22101	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Bank wiring fee				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		001		Allocated Activity or Event Year-To-Date 333020.50	
		Category/ Type		Date 08 / 30 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.20			12.80		20.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Lexington Insurance Co,</b>		<b>Transaction ID : H4.274441</b>		Allocated Activity or Event:	
Mailing Address 100 Summer St				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Boston		State MA	Zip Code 02110	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Property & liability ins premium				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		001		Allocated Activity or Event Year-To-Date 333640.32	
		Category/ Type		Date 08 / 30 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
223.14			396.68		619.82

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
422.82		751.66		1174.48

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Cox Communications</b>		<b>Transaction ID : H4.274434</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 183124					
City Columbus	State OH	Zip Code 43218			
Purpose of Disbursement: Office internet service		001		Allocated Activity or Event Year-To-Date 333850.31	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 31 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
75.60			134.39		209.99

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Hanover Insurance Co.</b>		<b>Transaction ID : H4.274435</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 580045					
City Charlotte	State NC	Zip Code 28258			
Purpose of Disbursement: Liability & workers comp ins premium		001		Allocated Activity or Event Year-To-Date 334397.32	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 31 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
196.92			350.09		547.01

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Chain Bridge Bank</b>		<b>Transaction ID : H4.274450</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1445-A Laughlin Ave					
City McLean	State VA	Zip Code 22101			
Purpose of Disbursement: Wiring fee		001		Allocated Activity or Event Year-To-Date 334417.32	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 31 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
7.20			12.80		20.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
279.72		497.28		777.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF VIRGINIA INC**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Platinum Plus for Business</b>		<b>Transaction ID : H4.274463</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 15469					
City Wilmington	State DE	Zip Code 19886			
Purpose of Disbursement: Intersect charge		001		Allocated Activity or Event Year-To-Date 334617.32	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 31 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
72.00			128.00		200.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Wells Fargo Bank</b>		<b>Transaction ID : H4.274872</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1021 E. Cary St.					
City Richmond	State VA	Zip Code 23219			
Purpose of Disbursement: Bank service charge		001		Allocated Activity or Event Year-To-Date 334619.32	
Activity or Event Identifier: Administrative		Category/ Type		Date 08 / 31 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
0.72			1.28		2.00

<b>C. Full Name (Last, First, Middle Initial)</b>				<b>Allocated Activity or Event:</b> <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address					
City	State	Zip Code			
Purpose of Disbursement:				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/ Type		Date	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.72		129.28		202.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
27276.62	48491.78	75768.40